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ABSTRACT

The principal aim of this study is to provide information on the use and abuse of alcohol and drugs by Queensland school children, and survey their attitudes toward and knowledge about alcohol and drugs. Various questionnaires were presented to a large sample of students from grades six to twelve. Some results were: (1) from grade six to twelve both alcohol consumption and positive attitudes toward alcohol increase greatly; (2) beer and spirits are the more popular; (3) a higher percentage of males then females are drinkers; (4) use of all six drugs studied, except inhalents, increases markedly with grade; (5) after alcohol, cannabis is the next most popular substance during the high school years; (6) sex differences in usage occur only for a few drugs; and (7) younger students perceive little difference in the danger to health of the various drugs, while older students tend to rate the danger more realistically. (SE)

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The first report in a series on the Queensland Alcohol and Drug Study

ALCOHOL AND DRUG USE BY QUEENSLAND SCHOOL CHILDREN

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Brisbane, July 1975

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FOREWORD

In 1974, the Queensland Alcohol and Drug Study was initiated to provide objective and precise measures of alcohol and drug use by Queensland school children. This report is the first in a series on the study and deals solely with grade and sex differences in alcohol and drug use, in student attitudes, and in knowledge of alcohol and drugs. Other reports in the series will examine the effectiveness of the alcohol and drug education programs that are presently given to high school students in Queensland, and the relationship of social and personal variables to the use of alcohol and drugs by Queensland school children.

The two bodies largely responsible for alcohol and drug education in Queensland, the Queensland Health Education Council and the Queensland Co-ordinating Committee on Alcoholism, initiated and commissioned this research study into alcohol and drug use by Queensland school children. The study was conducted by the Research Branch of the Department of Education, Queensland.

T.J.T.
L.McC.

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INTRODUCTION

Alcohol and drug education cannot proceed in a vacuum: information must be available on the extent and nature of alcohol and drug use in the target population. Often such information is based on the subjective impressions of the educators and is inaccurate in the detail or even in the general pattern of alcohol and drug use.

There have been a number of efforts made to provide more objective information. Unfortunately, however, the results of only one major study on alcohol and drug use by Australian school children has been fully published to date. This is the study conducted in Melbourne in 1972 (Krupinski & Stoller, 1973) in which alcohol and drug use by fifth form students and various other groups was examined. About one in eight of the Melbourne students reported that they had used illicit drugs, although half of these were experimental users only. Regular drinking of alcohol was widespread. A study of alcohol and drug use in New South Wales between 1971 and 1973, involving a variety of respondents including fourth and sixth form students, has been partially reported by Bell, Rowe and Caldwell (1971). A preliminary report of a study of drug use by high school students in Canberra has been released by Irwin (1974). An examination of alcohol use by school children in New South Wales has recently been conducted by Egger, but the results have not yet been released.

The studies of alcohol and drug use in Australia that have been published are generally not directly relevant to a study of school children. For example, Encel, Kotowicz and Resler (1972) studied drinking patterns in Sydney using a sample of people aged fifteen years and older. Drug use in a similar sample from the Sydney suburb of Manly was examined by George (1973). Hasleton (1971) dealt with a sample of university students. One study did examine alcohol use by school children (Colbert, Meibusch, Rodwell, & Thomas, 1966) but used an unrepresentative sample from only one city.

In 1974 there was little hard evidence of the extent and nature of alcohol and drug use by school children in Australia. For Queensland, subjective impressions of use were all that was available: no objective and precise measures of alcohol and drug use by Queensland school children had been made. The present study was initiated in 1974 in order to provide such measures. The principal aim of the project is to provide information on the use and abuse of alcohol and drugs by Queensland school children and to collect information on their attitudes towards alcohol and drugs and their knowledge about these substances. A secondary aim of the study is to evaluate the alcohol and drug education programs that are presently given to high school students in Queensland.

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METHOD

The aim of the sample design was to achieve a representative sample of Queensland school children in grades six to twelve. The technique used was stratified two-stage cluster sampling. The primary units were schools, stratified by geographical location and type of school. The sampling proceeded independently for each of the seven grades. The purpose of the sampling was to select 20 schools for each grade, and to obtain responses from 25 pupils in each of the schools. To allow for wastage 30 pupils were randomly selected in each case. Within each of the seven grades all pupils in Queensland had an equal probability of being selected into the sample.

The total list of Queensland schools was divided into eight strata on the basis of:

(1) geographical location of school i.e.
   (a) metropolitan;
   (b) town with a population in excess of 30 000;
   (c) town with a population under 30 000;
   (d) country; and

(2) type of school i.e.
   (a) Government;
   (b) non-Government.

The proportion of students in each stratum was then determined separately for each grade and the number of schools required to reflect this distribution in each grade sample was calculated.

The same procedure to select the required number of schools was followed for each stratum of each grade population. Those schools in the stratum with no pupils in the grade were deleted, and of those remaining, each school with less than 30 pupils in the grade was merged with schools following it on the stratum list until a "pseudo-school" was created with 30+ pupils in the grade. A unique set of numbers, equal to the number of school pupils in the grade, was allocated to each school. That is, the first school (with p pupils in the grade) would be given the numbers 1 to p, the second school (with q pupils in the grade) would be given the numbers (p+1) to (p+1+q) etc. until the numbers 1 to N, where N is equal to the number of Queensland pupils in that grade in that stratum, were allocated. A set of pseudo-random numbers equal to the number of schools required and within the range 1 to N was then generated to select the schools for the sample. If the number of a pupil was generated then the pupil's school was selected. If a school that formed part of a "pseudo-school" was thus selected, all schools forming that "pseudo-school" were included in the sample.

The pseudo-random numbers were generated by the random-start equal-interval method, so no school could be selected more than once for the same grade sample. This method of random number generation is best illustrated by an example. If there are five schools to be selected in a stratum with 10 000 pupils, the numbers 1 to 10 000 are divided into five equal intervals i.e. 1 to 2 000, 2 001 to 4 000, 4 001 to 6 000, 6 001 to 8 000, 8 001 to 10 000. One random number is then generated within the range of the first interval. The four other numbers required to select the five schools are generated by serially adding the number of students in each interval to the first random number.

Since the school selection was done independently for each grade, some schools were selected for more than one grade. No school was selected more than twice. In all, 138 separate schools were selected.

comprising 102 Government and 36 non-Government schools. The set of 138 schools was made up of 110 separate schools and 28 schools which were members of eleven "pseudo-schools". Eight of the "pseudo-schools" were Government schools in country areas and three were non-Government schools in towns with a population of less than 30 000.

On 20 June 1974 a letter was sent to the principals of the 138 schools seeking the participation of the school in the study and setting out details of pupil selection. Of the 138 schools, 129 agreed to participate in the study, while nine schools, representing eleven selected grades and thus 8.5% of the target sample, refused to participate. Four classes at three other schools were randomly chosen from within the now under-represented strata as replacement classes. The other seven classes were not able to be replaced before the questionnaires were to be administered. Table 171 gives a list of all schools that participated in the study.

The characteristics of the sample of 3 362 school children are described in Table 1. As Table 2 shows the sample is representative as a whole on the dimensions of sex and school type, although it is not representative on these dimensions for each grade taken separately.

Thirty pupils were chosen from the specified grade of each of the selected schools. In the case of primary schools a class of the grade was randomly chosen and all the pupils in that class were administered the alcohol and drug use questionnaire. For high schools, the principal was provided with a list of 30 random numbers, within the range of 1 to N, where N is the number of students in the grade. The principal was asked to select the corresponding pupils from the class list. The importance of not departing from this strictly random selection was stressed. In a minority of cases the school forwarded a list of the grade pupils to the researchers who then randomly selected the 30 pupils.

In order to achieve reasonably precise grade statistics, the sampling design aimed to achieve an approximately equal number of subjects in each of the seven grades. As there are a good many more pupils in the lower grades than there are in the upper, the total sample as derived is not representative of the population. A weight was thus applied to each student according to grade so that the weighted sample would be representative of the population. The grade weights are as follows:

Grade 6	1.2
Grade 7	1.35
Grade 8	1.18
Grade 9	1.16
Grade 10	1.17
Grade 11	0.52
Grade 12	0.42

The weighted sample was used for all analyses in this report, with the exception of the item analyses of the alcohol and drug knowledge scales. The weighting introduces rounding error since the number of subjects derived through weighting need not be an integer, but has been rounded to one in the tables. Thus the number of subjects in subsamples may not sum exactly to the number in the total sample e.g. the number of male and female subjects in an analysis may not equal the total number of subjects in the analysis. Table 3 provides an example of this apparent inconsistency. An inspection of Table 1 reveals the extent to which the weights alter the effective number of subjects in each grade.

It is most important to note that since the sample for this study is not a simple random sample, the significance levels given for the various analyses in this report should not be taken at their face value.

It can be assumed from the results of previous surveys that the intra-class correlation is positive in educational surveys i.e. that pupils in the same school are more similar than would be an equal number of students taken at random from the population. Under this assumption, the standard errors are underestimated and the χ^2 values and the F values are overestimated if they are calculated, as they are in this study, on the basis that the sampling is simple random sampling. That is, if a relationship, for example, between grade and drug taking, is found to be just significant at the 0.01 level under the assumption of simple random sampling, then it is highly likely that the 'actual' significance level is greater than 0.01 for the complex sampling design used in this study. Such a relationship should not then be regarded as significant because of the deviation from simple random sampling. Thus a conservative significance level should be adopted in interpreting the analyses in this report. A significance level of 0.001 (i.e. the result

is held to be statistically significant if $p < 0.001$) is certainly not too conservative, bearing in mind also the number of analyses done on the data. In order to allow flexibility of interpretation, the significance level accepted in this report for the purpose of discussion of results is the 0.01 level, but the estimated significance level is given in each case.

One aim of the study is to evaluate the alcohol and drug education programs that are presently given to high school students in Queensland. The evaluation design is the pre-test post-test model with experimental and control groups. All high school grades in the sample (grades 8–12) were randomly assigned to one of four groups, the first three of which are experimental groups and the fourth is the control group:

(1) alcohol education program given;
(2) drug education program given;
(3) both the alcohol and the drug education programs given;
(4) no alcohol or drug education program given.

Students in all four groups and those in the primary school sample were administered the Alcohol and Drug Questionnaire between 16 and 27 September 1974, and again between 4 and 8 November 1974. The alcohol and drug education programs for the first three groups were given between 7 and 18 October 1974.

Criticism is often aimed at the questionnaire method of data collection. However a study by Smart (1970) showed a very high correlation between the percentage of marijuana users derived from students' written reports of personal marijuana use and that derived from the students' estimates of the percentage of marijuana users among their classmates. Similar findings for alcohol and tobacco have been reported by Goldstein (1966). Also, a report by Petzel, Johnson and McKillip (1973) showed that removal from the sample of those students claiming to have used a bogus drug did not significantly alter overall drug use figures. None of the students included in Bogg's (1971) study indicated use of any of the four fictitious drugs included in his drug list. These results have helped establish confidence in the value of self-report data.

A pilot study was run to refine the Alcohol and Drug Questionnaire. A total of 323 pupils in grades six to twelve from four metropolitan schools were administered the pilot questionnaire in early August 1974. The pilot questionnaire contained 100 attitude items, 84 drug and alcohol knowledge items, 92 background information items, 36 alcohol use items, and 49 drug use items. The items were either generated by the researchers or culled from previous studies on alcohol and drug use.

After examination of the data, questions were reworded to clarify meaning or to avoid skewed distributions of responses. The drug and alcohol attitude items were separately submitted to a principal components analysis followed by a varimax rotation. Those items that were relatively pure measures of factors were retained, other items were constructed to reinforce some of the factors, and the items that loaded significantly on more than one factor, or were too similar to purer items, were deleted. In all, 68 items were chosen or created for use in the final questionnaire form: 34 drug attitude items and 34 alcohol attitude items.

The alcohol and drug knowledge items were submitted to an item analysis. Items which correlated highly with the scale total and which had distributions of right/wrong responses that did not depart greatly from rectangularity were selected for inclusion in the final form of the questionnaire. In this way 20 drug knowledge and 20 alcohol items were chosen.

The final version of the questionnaire was composed of five separate parts:

Alcohol use	42 items
Drug use	77 items
Attitudes	68 items
Knowledge	40 items
Background information	77 items

Five forms of the questionnaire were used, in which the order of the five parts was varied to produce a counterbalanced design. Schools were randomly allocated to one of the five forms.

The items on drug use were divided into six sections, one for each of six types of drugs. The six categories of drugs were described in the questionnaire as follows:

cannabis	–	for example Marijuana ("pot", "grass") and hashish ("hash");
inhalants	–	for example the sniffing of aeroplane glue, pressure packs, solvents or paint thinners;
stimulants	–	such as the amphetamines ("pep pills", "speed") benzedrine ("bennies") and dexedrine ("dexies"), and cocaine ("coke");
hallucinogens	–	such as L.S.D. ("acid"), some mushrooms ("magic mushrooms") and datura;
narcotics	–	such as heroin ("H", "horse", "smack", "rock"), morphine ("morph"), pethidine, opium and methadone;
depressants	–	such as the barbiturates (e.g. amytal, nembutal, seconal) and other sedatives ("goofers", "barbs", "minors", "mandrax", "sleepers", "downers").

While cannabis and hallucinogens are illicit drugs, it should be noted that it is possible to obtain some types of depressants, stimulants and narcotics on a doctor's prescription. Use of such drugs for medical purposes was not explicitly excluded in questionnaire items on drug use. At the beginning of the questionnaire, it was stated that for our purposes, the word "drugs" did not refer to such things as tobacco, aspirin, A.P.C., alcohol, tea or coffee. Similarly, unless specifically indicated otherwise, the term "drug" or "drugs" as used in this report does not include alcohol.

A package of questionnaires and separate answer sheets was sent to each of the 132 schools participating in the project in the week prior to the period set aside for test administration. The following points were made in the instructions given to the principal:

(1) a school teacher was to administer the questionnaire to the chosen students as a group;
(2) the questionnaire was to be completed on one day, though administration of the five parts of the questionnaire could be interspersed by rest periods;
(3) the students were to be told not to put their names on the answer sheets, that their names were chosen "out of a hat", and that no one at the school would ever see their answers since all answer sheets were to be inserted by the individual students into one envelope which would be immediately sealed and then posted to the researchers;
(4) the teacher was to read to the students all instructions concerning completion of the questionnaire to ensure that all students understood what to do, and to answer all queries that did not prompt a particular answer to an item.

The questionnaire was administered twice in this way to all students. The analyses in this report refer to the responses to the first administration only.

The answer sheets from the second administration of the questionnaire were paired as far as possible with those from the first. This matching was done for each student on the basis of school attended, father's occupation, the student's own career ambition, parents' and students' countries of birth and the first letter of the mother's maiden name. This information was obtained in open-ended questions at the end of the "Background Information" section of the questionnaire. In all, 80.2% of the questionnaires were matched successfully.

Where there were more than 25 students with matched answer sheets for any class, 25 were randomly selected for inclusion in the sample. After the excess students were thus deleted, 3 362 completed returns of the first administration of the questionnaire were available. These 3 362 students form the sample examined in this report.

Of the 3 362 students, only 88.8% completed the second administration between 4 and 8 November. Twelve schools, representing fifteen classes, gave the questionnaire only once, mainly because of scheduling problems.

In order to obtain more detailed information on alcohol and drug use by school children, 144 students in grades six, nine and twelve of seven metropolitan schools were individually interviewed in April 1975 by trainee Guidance Officers. No attempt was made to obtain a representative sample of students for interview. The trainee Guidance Officers are all experienced teachers with university qualifications and with training in interviewing. Half of the students interviewed had reported some drug use in a shortened version of the questionnaire used in the larger study, and half had not. Students were identified by

number only, both on the questionnaire and in the interview. The students interviewed were not asked to give their name and complete anonymity was preserved. The interviews were structured and dealt with questions of alcohol and drug use touched on in the questionnaire.

Before analysis of the data commenced, certain inconsistencies were removed from the responses of some subjects. Those subjects who, in response to a direct and simple question, reported that they had never used a specific substance (e.g. cannabis) were treated as non-users on all other items concerning that substance, regardless of their answers to those items. In addition, those students who indicated that they had had alcohol only once to taste were treated on all other alcohol items as if they were not current drinkers.

All analyses discussed in this report with the exception of the item analyses, were calculated using standard computer programs contained in the Statistical Package for the Social Sciences (Nie, Bent, & Hull, 1970). The item analyses were computed using the program TESTAT (Veldman, 1967).

Only a few statistical analysis techniques are referred to in this report: Chi-square, analysis of variance, item analysis, and factor analysis. Simple descriptions of the first two techniques may be found in Glass and Stanley (1970), and of the last two techniques in Cronbach (1970).

It is important to note that all students did not respond to all items and so it is not possible to say that those answering one item a particular way are necessarily the same students answering similarly to another, related item. For example, it is not valid to infer that the difference between the percentage saying they have been offered cannabis and the percentage saying they have used it, necessarily represents the exact percentage who would say they have refused an offer of cannabis.

3

ALCOHOL AND DRUG USE

Alcohol

The students were asked whether they had ever had an alcoholic drink, other than on religious occasions. As Table 3 indicates, 58.9% of the sample have taken a drink more than once, and a further 26.0% have taken a drink once to taste, leaving only 15.1% of the pupils who have never taken a drink. As might be expected grade has a strong effect on drinking behaviour: the percentage of those who have taken a drink more than once ranges from 33.0% at grade six to 86.8% at grade twelve. Figure 1 displays this increase in the proportion of drinkers with grade. Far ahead of all others is the line representing the proportion of students in each grade who have at least tasted an alcoholic drink at some time. Greater rates of increase over grade are shown for the proportion of students who have taken alcohol more often in the past than only once to taste, and for the proportion of current users. At each grade, fewer girls than boys have had a drink, giving a significant overall sex effect ($\chi^2 = 43.84$; $df = 1$; $p < 0.001$).

Two reasons might help to explain the lower use of alcohol by the young students: lack of opportunity and an unwillingness to take a drink if offered. Tables 4 and 5 are relevant to this point. Table 4 reflects grade differences in one type of opportunity for use of alcohol and shows that the percentage of students who have never been offered any alcohol declines from 45.4% at grade six to 3.5% at grade twelve. That the younger students are, in addition, less willing to take an offered drink is evidenced by the results in Table 5. Of grade six children, 51.9% say they would not take a drink offered by a good friend. This percentage reduces to 8.4% in grade twelve. One possible reason for this unwillingness is shown in Table 6. While only 2.7% of grade twelve students think that drinking is very dangerous to one's health, 35.1% of grade six pupils believe this. A second possible reason that the percentage of pupils willing to drink increases with grade maybe a concomitant increase in peer group pressure to drink since it has been shown (Davis, 1963) that peer group norms are an important influence on personal behaviour and that small groups of close friends may be expected to exhibit similar social behaviours in many areas.

In order to gauge the strength of peer group pressure to drink, students were asked how many of their five best friends were drinkers. The marked change with grade is shown in Table 7. While over half of the sixth grade students claim that none of their five best friends drink, over half the twelfth graders say all five do. An interesting point is the large difference between the numbers saying "none" and "one friend" in the lower grades and between those saying "four friends" and "five friends" in the higher grades. These trends indicate clearly the strong pressure towards conformity in drinking in the sample, and reflect the finding by Alexander (1964) that "in collectivities of high mutual attraction there is a tendency toward consensus in drinking behaviour (p. 395)." This consensus may be achieved by rejection of deviant members or by modification of the behaviour of group members.

Factors such as the students' willingness to use a substance, its availability, its perceived danger to health and the peer group pressure towards its use, are all likely to influence a student's anticipated future personal use of the substance. Table 8 shows that nearly 60% of grade six children are sure they will not be using alcohol in one year's time. On the other hand, almost 80% of grade twelve students see their future drinking as quite likely. Quite reasonably, the percentage in each grade who believe they

might be drinking in one year's time is never less than the percentage reporting that they have taken an alcoholic drink more than once to taste.

Table 9 shows that most students have had their first drink of alcohol before they turn eleven years old. This figure contrasts with the age of first drink being thirteen to fourteen years in a Glasgow study (Davies & Stacey, 1972) and in a review of the literature by Maddox (1970). This difference may be partly accounted for by two factors. The first is that the present study includes students younger than in most other studies and as Table 9 indicates, the lower the average age of the sample the lower the reported age of first drink. The second factor is that a number of studies when quoting age of first drink, refer to the first personal drink not, as in the present study, the first taste of beverage alcohol whether it be a sip from a parent's glass at Christmas, or a glass of beer bought at a hotel.

Tables 10 and 11 indicate that the pupil typically has his first drink at home with his parents and that a minority of drinkers are introduced to drink by friends at a party. This is a pattern found in many other studies (Kane & Patterson, 1972; Harrison, Bennett, & Globetti, 1970). The older students are more likely than are the younger to have had their first drink at a party and less likely to have been introduced to drink at home. This is probably due to the fact that the external pressure to drink and the opportunity to find sources other than their parents for alcohol increase with age. As might be expected and as Table 12 shows, the number of students who drink now increases rapidly with grade, from 31.2% at grade six to 83.3% at grade twelve. As usual, the girls lag somewhat behind the boys ($\chi^2 = 55.66$; $df = 1$; $p < 0.001$), but the gap is quickly narrowed with increase in grade.

Inspection of Tables 13 to 16 and Figure 1 reveals that the proportions of students presently drinking beer, spirits, liqueurs and wine all increase significantly over grade, but the rates of increase differ. Figure 1 shows clearly that the rates of increase for beer, wine and liqueurs are highly similar but that spirits exhibit a sharper rise. The percentage who currently drink beer changes from 26.6% at grade six to 65.1% at grade twelve; wine rises from 24.3% to 68.6%; liqueurs show an increase from 7.5% to 43.1%; and spirits rapidly increases from 14.0% to 71.3%. Spirits trail wine and beer in popularity at grade six, but lead all drinks in popularity at grade twelve.

As has been found in other studies (Harrison et al., 1970; Smart, 1970), a higher proportion of males than females currently drink each type of alcohol (Beer: $\chi^2 = 161.78$, $df = 1$, $p < 0.001$; Wine: $\chi^2 = 19.91$, $df = 1$, $p < 0.001$; Spirits: $\chi^2 = 28.23$, $df = 1$, $p < 0.001$; Liqueurs: $\chi^2 = 11.75$; $df = 1$, $p < 0.01$). The sex difference for beer is large while that for spirits is minor. Beer is the traditional male drink in Australia and it is possible in the case of spirits that the kinds taken and the mixes used would differentiate better between the sexes. The patterns of sex differences for current use of wine and liqueurs are highly similar. Both are more popular with males than with females in the lower grades, but are used by a higher proportion of girls than boys in grades eleven and twelve. Increasingly, then, with age, the girls come to dominate in the use of the sweeter drinks.

The change with grade in the proportion who drink once a month or less is different for drinkers of beer, spirits, liqueurs, and wine. Tables 17 to 20 demonstrate that with increase in grade, liqueurs are taken less frequently by liqueur drinkers, intake of wine does not change, and beer and spirits are drunk more often. Since, as Table 9 shows, the average age of first drink is higher for the older students than it is for the younger, the grade differences in drinking frequency may be due to the fact that those students who enter the population of drinkers later than do others may also exhibit different drinking patterns from the early starters. They may, for example, drink more frequently (Engel et al., 1972). This interpretation is of course possible for all grade trends in the behaviour of drinkers or drug users as reported here. Other interpretations are possible however. The differences among the drinks in the change of frequency of use with grade may be due in part to sex differences in preferences for alcoholic drinks: males, the heavier drinkers, show a distinct preference for beer and, to a lesser extent, spirits; females, the lighter drinkers, predominate at the senior high school level in the use of wine and liqueurs. Hence the sex difference would damp a tendency for frequency of liqueur and wine consumption to increase with grade more than it would a tendency for the frequency of beer and spirits consumption to increase. It may also be hypothesized that frequency of wine drinking does not change with grade because, for school children, most wine drinking is done with meals under parental supervision. It is not likely that the frequency of such behaviour would change greatly over grades. This impression was reinforced in the interviews: over half of the 64 wine drinkers interviewed reported that when they drank wine, they usually did so at meals.

The reason for the apparent decline in frequency of liqueur drinking is harder to pin down. It may be that those who start drinking later in childhood tend to concentrate on the more popular beer and spirits at the expense of liqueurs. It may be however, that the younger children in the sample had particular difficulty in understanding some of the questions. An inspection of Tables 17, 18 and 20 shows that too many of the younger students report very high frequencies of alcohol intake: too high to credit. It would seem then that either more of the younger children were, because of lack of comprehension, responding randomly, or more were exaggerating their use of alcohol. This effect seems to have hit liqueurs particularly hard because of the lower number of liqueur drinkers and the fact that liqueur drinking is a rarer event than spirits or beer consumption.

It should be stressed, that when the younger subjects report behaviour contrary to reason and experience, and where the number of such subjects is small, for example those reporting use of liqueurs once a day or more, the results for these subjects should be viewed as probably grossly exaggerated.

Figures 2 to 5 show the increase in the percentage of current drinkers of beer, spirits, wine and liqueurs with grade. A current drinking frequency of "once a month or less" is defined to be occasional use. All higher frequency categories are defined as regular use. The percentages of students who are regular drinkers of each type of alcohol are also shown in Figures 2 to 5. Two factors account for differences among beverages in the rate of increase with grade of the percentage of students who are regular drinkers: the different rates of increase in the percentage of current drinkers of the beverage; and different rates of increase in the percentage of current drinkers who are also regular drinkers of the beverage.

As indicated previously, spirits are drunk by more grade twelve students than is beer. However as Tables 17 and 18 indicate, beer is drunk more often than spirits at all grade levels. When Tables 21 and 22 are compared it is seen that the same relationship holds for alcohol consumption per drinking session: the alcohol intake when beer is drunk is greater than when spirits are taken. This conclusion is based on the calculation that thirteen ounces of beer is approximately equivalent to two spirit drinks (two ounces) in alcohol content. That beer, a light alcoholic drink, is more frequently and heavily consumed by youth than is hard liquor, has been reported in other studies (Globetti & Windham, 1967; Jessor, Carman, & Grossman, 1968; Riester & Zucker, 1968).

Tables 21 to 24 show that the proportion of students who drink a minimal amount each time (e.g. half of a glass of wine, or half of a bottle of beer) decreases steadily with grade. Relatively heavy drinking thus becomes more common among drinkers with increasing grade.

Table 25 shows that older drinkers report more appreciation of the taste of their drinks than do younger drinkers. Most drinkers in grade twelve say they like the taste of their drinks very much whereas in grade six approximately equal percentages say they like it "a little" and "very much". It may be that liking the taste of alcoholic drinks is largely acquired by practice or it may be that the younger students are still experimenting with various types of alcohol and so are likely to try some they don't like, while older students have established preferences.

An examination of Table 26 shows that an approximately equal majority in all grades feel that their drinking frequency has not changed from six months ago. Younger students report a decline in drinking frequency over that period, while older students report an increase. The decline in drinking asserted by the younger students is surprising. It may be that the younger pupils see the phrase "six months ago" as taking in a longer period of time than does "current use". The younger students might have included Christmas and New Year drinks in the total for "six months ago", although such feasts preceded the survey by nine months.

Tables 27 and 28 reveal that the older drinkers do less of their drinking in the home with parents or other relatives than do the younger drinkers. Table 28 shows that 39.8% of grade six children do all their drinking at home while by grade twelve this percentage has shrunk to 3.5%.

Drinking thus starts in the home but rapidly expands beyond its boundaries. This is shown clearly in Tables 29 to 36 which indicate that the older student does more of his drinking with friends, at friends' homes, at friends' parties, at public functions, at hotels, in the open air, alone, and in cars than does the younger drinker. The pattern of drinking thus changes from a parent-oriented activity to an activity dominated by the peer group. These findings support trends found by Kane and Patterson (1972). The percentage of grade six children who do all or most of their drinking with friends is 7.2%, while at grade

twelve the corresponding figure is 42.6%. This same pattern is reflected in the responses shown in Table 37. The older students tend to obtain their alcohol more often from friends or by purchase and less often from parents. An interesting point in Table 37 is that the younger students more often obtain their alcohol surreptitiously from their parents than do the other pupils. The great majority of primary school drinkers are however given alcohol by their parents, probably in the form of a glass at meal time, a sip from their drink at a hotel, or a glass on a special occasion. Harrison et al. (1970) also found that parents are the usual source of alcohol for young students.

Tables 38 and 39 indicate that although the great majority of drinking students believe that their parents know that they drink, fewer believe their parents know how much they drink. More than one-third of the grade twelve drinkers report that they drink more than their parents believe, while only 5.1% report they drink less than their parents believe. This supports the finding by Riester and Zucker (1968) that heavy or frequent alcohol consumption is associated with drinking with a small group of adolescent peers in the absence of adults. The situation is different at the grade six level where the 11.6% who claim they drink more than their parents believe is balanced by 12.9% who claim to drink less. This change in pattern over grade is consistent with the finding that the younger students drink less frequently and less heavily than do the older students, and that their drinking is also less likely to be done in the company of peers.

No attempt was made in this study to ascertain whether or not these students believed they had their parents' approval for drinking. It is interesting to note that Kane and Patterson (1972) reported that only 2.0% of infrequent drinkers and 15.0% of frequent drinkers had parental approval even though a majority of both groups felt that their parents knew about their drinking.

It is apparent from Table 40 that the proportion of students who have tried to drink at hotels while underage increases rapidly from a relatively minor 10.8% at grade six to a significiant 62.5% at grade twelve. The increase is particularly great over the last two high school years, when it might be expected that the student is increasingly able to pass for the eighteen year old who is legally able to purchase drinks. This possibility is reinforced by an examination of Table 37: there is a sudden increase between grade seven and twelve in the percentage of students who usually obtain their drink by purchasing it themselves. In the interviews all six of the grade six drinkers who reported that they had drunk in a hotel indicated that they had done so with their parents. Of the nine grade twelve students who reported in the interview that they drank in hotels, two-thirds indicated that it was usually with friends rather than parents. This would seem to indicate that the bulk of the young students who reported hotel drinking referred to parentally supervised hotel drinking which, although illegal, is quite different in kind from the hotel drinking with friends that is more typical of the older students.

Table 41 shows that of those who have tried to drink at a hotel while underage, 26.5% have been refused service at some time. The percentage tends to be lower for older students than for the younger. If, over the past seven years, increasing numbers of young students have tried to drink at hotels this finding would be easy to explain. It is not possible to test this inference with the data in this study, but it should be noted that it is consistent with the fact that the legal age for purchase of alcohol in Queensland dropped from 21 to eighteen years during the seven year period.

Students were asked a number of questions on the effects that drinking has had on them. As Table 42 shows, 38.3% of the drinkers in the sample report having been drunk. There is a significant increase, from 27.3% to 56.4%, from grade six to grade twelve in the proportion of drinkers who have been drunk. This may be due to differing definitions of drunkenness. To a number of the younger students, dizziness or mild lack of co-ordination might imply drunkenness. The older students may be more likely to use memory blackouts, and being sick from drink as signs of drunkenness.

Tables 42 to 46 show that while 38.3% of drinkers say they have been drunk, 29.6% of drinkers have behaved atypically, 28.0% been ill, 16.8% lost their memory, and 3.5% been in trouble with the law, because of drink. The proportion of pupils who report these behaviours increases with grade level, except for the rarest behaviour: there is no significant change over grade in the proportion of students who have been in trouble with the law because of drink. This lack of a significant trend may be due to the small number who report trouble with the law because of drink, or it may be due to age differences in the situations perceived as "trouble with the law".

Drinkers reported reasons for drinking are shown in Table 47. The most noticeable aspect of the table is that fewer students in the higher grades give the more unrealistic reasons for drinking. The older pupils stress the beneficial effects of alcohol more so than do the younger. That alcohol helps them to mix more easily, to relax and to feel happy are important reasons for drinking given by grade twelve pupils. The younger students are more ingenuous: 61.7% of grade six children say they drink because they like the taste. Nonetheless, whatever the increase in alcohol sophistication from grade six to twelve, 39.2% of grade twelve drinkers give liking the taste as their reason. Other studies report a similarly high proportion of school children offering this as their major reason for drinking (Mackay, Phillips, & Bryce, 1967). Table 48 reveals that not liking the taste is a popular reason among non-drinkers for not drinking. Presumably, lack of opportunity (see Table 4) and the relative absence of the pressure from peers who drink (see Table 7) go a major part of the way to explaining the low use of alcohol in the primary school grades. Those who have not had a drink by grade twelve would usually have had a number of opportunities to drink and be under peer pressure to do so. Their reason for not drinking is thus more likely to be a personal and internal one. This is reflected in the finding that the percentage of non-drinkers who indicate that they do not drink because drinking is against their moral principles increases from 2.9% at grade six to 40.5% at grade twelve. That the younger children are more under the domination of their parents in the matter of drink is suggested by the 16.0% of non-drinking grade six children who report that they do not drink because their parents do not approve of drinkers. No grade twelve students gave this as a reason for not drinking. Finally, there is some tendency for the younger pupils to offer the health danger of drink as a reason more often than older pupils do.

It is quite clear from Table 49 that the reasons provided in the questionnaire for giving up drink do not match at all well with those that the ex-drinkers would offer. There are too few students in categories other than "some other reason" for a comment to be made on the reasons for ex-drinkers giving up drink.

Cannabis

Table 50 shows the population percentage of students claiming to have used cannabis at some time. The range in affirmative responses is from 2.2% in the upper primary grades to 17.6% in grade twelve. Significant increases over grade occur for the sample as a whole and for males and females separately. Sometime use of cannabis is generally more common for males than for females ($\chi^2 = 9.06$; $df = 1$; $p < 0.01$). However, this trend is reversed in grade ten and more markedly so in grade twelve by which stage almost one in five girls has used cannabis at some time. A possible explanation for this reversal may be that the girls in the upper high school years tend to go out with boys older than themselves and are thus more likely to be mixing with people who are no longer at school, but are either in the work force or at tertiary institutions. It has been shown that the incidence of cannabis usage there is higher than within the school (Graves, 1973). Hence, girls in the senior high school years are likely to have greater opportunity for cannabis use then are their male peers.

Obviously personal use of cannabis is not the only indication of a person's contact with the drug and students were asked if they had ever been offered cannabis. Table 51 shows significantly increasing percentages over grade: in grade six 3.0% of students have been offered cannabis, in comparison to 25.7% in grade twelve.

When asked if they would use cannabis if it were offered by a good friend, students could reply "yes I am sure I would", "yes I might", "I don't know", or "no". The results are shown in Table 52. Grade differences are significant and students who are sure they would not accept an offer of cannabis from a good friend drop from 79.7% in grade six to 64.8% in grade twelve. On the other hand, only 0.2% of grade six pupils are sure they would accept the offer if it were made; the corresponding percentage for grade twelve is 7.3%.

The amount of danger a student sees in a drug will presumably affect his decision whether or not to use it. Students' perceptions of the danger to health of using cannabis are shown in Table 53. In grade

six, 71.9% of students see cannabis as very dangerous to health. By grade 12, this figure has dropped to 24.9%, while the number seeing cannabis as "not dangerous at all" increases from 1.8% in grade six to 14.4% in grade twelve.

Peer group influences are very important during the school years. The number of a student's close friends using cannabis may be used as a rough measure of the degree of peer pressure to use cannabis. Table 54 shows the number of cannabis users among a student's five best friends. Significant grade differences are again observed. The number of students whose five best friends include no cannabis users drops from 94.6% in grades six and seven to 73.1% in grade twelve, while the number claiming that all of their five best friends use cannabis increases from 1.2% in grade six to 4.1% in grade twelve. The general trend in this table is one of greater exposure in higher grades.

Table 55 indicates that a large majority of students do not anticipate using cannabis in the near future. While 82.5% of the grade six students are sure that they will not be using cannabis in one year's time, only 73.7% of grade twelve pupils do not anticipate such use. Those students who see future use as a possibility or a definite probability increase from 1.8% to 12.6% of the sample from grades six to twelve.

So the general pattern is for older students to be more exposed to cannabis than are younger students and for students to be much more willing in the senior grades to try cannabis if it were offered by a good friend. A small but increasing percentage consider it probable that they will be using cannabis in the future.

Table 56 shows age at first use of cannabis. Those few students in the lower grades who report their first use as having occurred at age "18 years or older" are either adults enrolled as full-time primary or secondary students, or other students who have answered the question inaccurately.

In all grades, the majority first tried cannabis in the year of the survey or in the two years immediately preceding the survey. In Queensland, then, cannabis use has apparently increased rapidly from 1971 to 1974. An increase in use between 1971 and 1973 was found by Bell, Champion and Row (Bureau of Crime Statistics and Research, N.S.W., 1975). In their study of New South Wales students current marijuana use increased from 6.1% to 9.8% in fourth form, and from 7.0% to 14.0% in sixth form during those years.

Here, as in all similar tables, the small number of reported users in each grade must be kept in mind when interpreting the weighted percentage results.

Details on current use of cannabis are presented in Table 57 and once again an important grade trend emerges. A significant increase in the percentage of users over grade is seen for both males and females, giving a total increase from 1.4% in grade six to 11.5% in grade twelve. Current use of cannabis is, like sometime use, generally more widespread among males than females ($\chi^2 = 10.87$; $df = 1$; $p < 0.001$).

For all the drugs, once the population considered in a table is restricted to users only, the grade sample sizes are so low that meaningful use of chi-square to estimate grade differences in response to items is no longer possible (Siegel, 1956, p.178). Results have been collapsed across grade in these tables and conclusions are drawn about the particular user population on this basis for all drugs except for narcotics. In the latter case, the total sample size is too small to allow useful population estimates and so only the raw sample totals have been presented.

Those students who report that they currently use cannabis more than once a month have been labelled regular users. Figure 6 presents a grade-by-grade comparison of the percentages of (a) students who have ever used cannabis; (b) students who use it now; and (c) students who are regular users. An almost exponential increase for "ever used" is evident and it can be seen that the number of continuing regular users is a small proportion of the number of students who have used the drug.

Tables 58 and 59 show that of those who claim to be currently using cannabis, over half do so only once a month or less and a similar percentage smokes only one cannabis cigarette each time. The figures given here for the usual number of cannabis cigarettes smoked each time correspond closely to those found by Rouse and Ewing (1973). There may be some exaggeration however: some smokers might have reported the number of cannabis cigarettes passed around a small group, rather than the number smoked only by the respondent himself. Just over 8% claim to smoke cannabis once a day or more.

Table 60 shows that over two-thirds of these students either use cannabis less often now than they did six months ago, or their general pattern of use has not changed over the six months.

A list of possible sources of cannabis was presented in the questionnaire and users were asked to indicate their usual source of supply. Table 61 shows the most common sources and it can be seen that overall, friends play the most important role. Siblings, probably older siblings, act as a minor source. Dealers are not a significant source of cannabis for the school children.

In order to obtain some idea of the extent of parental knowledge of their children's use of cannabis the self-proclaimed users were asked to indicate whether they believed their parents knew they used cannabis. Table 62 shows that 84.0% believe their parents do not know that they use cannabis. Of course parents' knowledge or otherwise of a child's drug use is no indication of their approval or disapproval.

Inhalants

Parallel questions were included in the questionnaire for inhalants, but few significant grade trends occur here.

Table 63 shows the percentage of students in the total population claiming to have used inhalants at some time. No significant changes over grade are indicated for either males or females but a significant sex difference does emerge ($\chi^2 = 14.06$; $df = 1$; $p < 0.001$) with significantly more males than females reporting inhalant use.

As a crude index of opportunity for use of inhalants, students were asked whether they had ever been offered inhalants. Table 64 shows that there are no significant grade differences and that less than 10% have been offered inhalants at any time.

Students' willingness to use inhalants if they were offered by a good friend shows a significant change over grade as Table 65 indicates. The main increase occurs for the "yes I might" category: 7.0% of grade six students report that they might be willing to use inhalants, compared with 10.9% of grade twelve students. Comparing this table with the corresponding one for cannabis, it can be seen that while upper primary students seem more willing to use inhalants this tendency is reversed for senior school children. This is probably an expected trend since inhalants are generally considered to be low prestige drugs and it is likely that older students would prefer cannabis to inhalants if cannabis were available.

Table 66 gives details of the perceived danger to health of using inhalants. It is the only other table in this section that reveals significant grade trends. In grade six, 63.2% of students see the use of inhalants as very dangerous to health. By grade twelve, this figure drops to 38.7%.

It is interesting to compare this table with the parallel one for cannabis. It can be seen that, in the lower grades, inhalants are seen as less dangerous than cannabis while in the senior grades inhalants are seen as more dangerous. For inhalants, the emphasis shifts from "very dangerous" to "fairly dangerous" with increasing grade. The swing for cannabis is more decisive with the emphasis being towards "only slightly dangerous" for the older students.

This perhaps again reflects the idea that inhalant use is a phenomenon more closely associated with primary school children than with high school students and that the younger pupils may not be sufficiently aware of the possible dangers of some of these products, regarding them simply as fun to use. Older students, more exposed to publicity about cannabis and the use of cannabis, tend to see cannabis as the less dangerous to health.

Possible peer group influence, as reflected by the number of a student's five best friends who use inhalants, does not change significantly with grade, as seen in Table 67. In all, 93.5% of students report that none of their five best friends use inhalants. All five are users in 1.3% of cases and four of the five in only 0.6% of cases.

Table 68 shows that there are no significant grade differences in anticipated use of inhalants, and that 84.4% of students do not anticipate using inhalants in a year's time. Only 0.9% are sure they will be using it. Comparing these reactions again with those for cannabis, it appears that slightly more students anticipate cannabis use than anticipate inhalant use.

Table 69 shows age at first use of inhalants. Across the grades, there is a generally higher proportion of students indicating "10 years or less" than in the parallel table for cannabis use. However, a large proportion indicate that they first used the drug within the two years prior to the survey, a finding similar to that for cannabis.

Details of current use of inhalants are presented in Table 70. There are no significant grade differences in current inhalant use. Over 96% of students are not current users, and a disproportionate number of these are female ($\chi^2 = 7.64$; $df = 1$; $p < 0.01$).

Figure 7 presents a grade-by-grade comparison of the percentage of (a) students who have ever used inhalants; (b) students who use them now; and (c) students who are regular users. Regular users of a drug are those who report that they use the drug more than once a month.

Tables 71 and 72 respectively indicate that over half of the current users of inhalants do so only once a month or less and that more than two-thirds believe that they use less than most other inhalant users each time. Table 73 indicates that 80.5% of users claim that their present rate is either unchanged or has decreased from what it was six months ago.

Cabinets at home and grocery or hardware shops are by far the most common sources of inhalants for users, as Table 74 shows. Naturally the cheapness and common availability of these kinds of drugs makes their use all the more attractive and all the harder to curb. Some of those who claim to obtain inhalants from their parents may be confusing the drug with medically prescribed substances for the relief of asthmatic or bronchial conditions. Alternatively, parents may provide the student with an inhalant such as glue or paint thinners in the belief that it will be used in a more conventional way than the student plans.

As indicated in Table 75, over one-third of users report that their parents know that they use inhalants.

Stimulants

Table 76 shows the percentage of students in the sample who claim to have used stimulants. The number increases significantly with grade from 4.1% in grade six to 10.5% in grade twelve. Significant trends also occur when males and females are analysed separately. There is no significant difference between the numbers of males and females who have ever used stimulants ($\chi^2 = 0.004$; $df = 1$; $p > 0.01$).

Opportunity for use of stimulants varies over grade as Table 77 reveals. The percentage who have been offered stimulants increases from 6.1% in grade six to 21.3% in grade twelve. Table 78 shows that the number who would accept an offer of stimulants from a good friend drops significantly from 83.4% in grade six to 64.6% in grade twelve. The largest increase over these grades occurs for the "yes I might" alternative, the range being from 4.0% at grade six to 17.6% at grade twelve. The response pattern for this item is very similar to that for the parallel cannabis item.

The perceived danger of stimulants to health is shown in Table 79. The data indicate a significant shift in emphasis over grade from "very dangerous" towards "only slightly dangerous". The percentage of students who see stimulants as very dangerous drops from 62.1% in grade six to 24.7% in grade twelve.

The only item dealing with exposure to stimulant use for which no grade differences are apparent concerned the number of the students' best friends who use stimulants. The results can be seen in Table 80. For 91.3% of the students, none of his five best friends take stimulants, while one of the five is a user in only 3.1% of cases. All five are users in 1.6% of cases.

A significantly higher proportion of students in the higher grades than in lower classes consider it possible that they may be taking stimulants in a year's time, as seen in Table 81. Decreasing numbers firmly reject the idea: 82.3% in grade six do not anticipate future use, while only 72.0% in grade twelve are equally sure. A similar pattern was found for cannabis. However, the increase in numbers who consider future use a possibility – from 2.6% in grade six to 7.6% in grade twelve – is not as great as for cannabis where the change was from 1.8% to 12.6%. Stimulants thus seem to be treated more cautiously particularly in the higher grades, than is cannabis.

Table 82 shows age at first use of stimulants. Once more a different distribution is apparent. Although again the majority of students used stimulants for the first time within the two years prior to the survey, the proportion of high school students using them first at age ten years or less is higher here than for inhalants or cannabis. However the low sample sizes must be kept in mind when comparing these percentages.

Details on current use of stimulants, orally and by injection, are presented in Tables 83 and 84 respectively. The percentage of current oral use by females increases with increasing grade, with a rise from 1.3% in grade six to 6.9% in grade twelve. On the other hand, the percentage of oral use by males shows no significant change with grade, the average incidence being 4.1%. However, the overall incidence of current oral use among males does not differ significantly from that among females ($\chi^2 = 0.414$; $df = 1$; $p > 0.01$).

No grade differences are apparent for either sex with respect to incidence of stimulant use by injection. On the average, 1.0% of males and 0.6% of females are current users. This sex difference is not significant ($\chi^2 = 2.13$; $df = 1$; $p > 0.01$).

Some stimulant users take their drugs both orally and by injection and Table 85 shows the distribution over grade of users of stimulants in any form. As for oral use, no significant grade change is apparent for males, though it is present for females. However, overall, there is no significant sex difference in stimulant usage ($\chi^2 = 0.39$; $df = 1$; $p > 0.01$).

Tables 86 and 87 show that over half the current oral users take stimulants once a month or less and almost half the needle users in the sample also indicate only occasional use. No generalizations to the total population can be made from the data in Table 87 since the sample size is so low. Table 88 reveals that over two-thirds of the current users believe they use less than most other stimulant users each time. Table 89 shows that almost 90% of current users report that they either take stimulants less often now or with about the same frequency as they did six months ago.

As was the case for cannabis, friends are a major source of stimulants. Table 90 also shows that 14.5% usually obtain stimulants from their parents, and 14.0% from a chemist shop with a doctor's prescription. It seems clear that a significant percentage of the stimulant use reported here is of a licit medical or semi-medical nature.

The use of "No-Doz" and similar products while studying for examinations and the use of slimming tables would be classified as semi-medical use. It is also likely that a significant percentage of stimulant users who report prescriptions as the source of stimulants, feign symptoms in order to obtain prescriptions from doctors. Such use would of course be classified as illicit use.

That a percentage of reported stimulant use is approved medical or semi-medical use is supported by the results in Table 91 where it is seen that a majority of users consider that their parents know they use stimulants.

Hallucinogens

Table 92 shows the percentage of students who report that they have used hallucinogens at some time. Significant grade differences occur for percentages of both males and females; the incidence for males increases from 0.4% to 7.6%, while that for females increases from 0.8% to 7.0%. There is no significant sex effect ($\chi^2 = 3.92$; $df = 1$; $p > 0.01$).

There are significant grade differences in the percentages of students who have been offered hallucinogens. As seen in Table 93, only 3.6% of grade six students have been offered hallucinogens but this rises to 15.1% in grade twelve. Table 94 indicates that 3.0% of students in grade six and 14.0% in grade twelve would possibly accept an offer of hallucinogens from a good friend.

Hallucinogens are perceived by students as the most dangerous of any drug considered so far. Hallucinogens are seen to be very dangerous by 75.3% in grade six, and by 55.8% in grade twelve: the grade trend towards less perceived danger in hallucinogens is significant, as Table 95 shows. The five best friends of a large majority of students in each grade do not include any hallucinogen users. However

Table 96 reveals that there is a significant decrease with grade in the percentage of students none of whose five best friends use hallucinogens: from 97.4% in grade six to 83.8% in grade twelve. Table 97 shows that the students' anticipated future use of hallucinogens changes significantly with grade. It is seen as at least a possibility by an increasing number of students, the range being from 1.2% in grade six to 7.7% in grade twelve. The idea of future hallucinogen use is firmly rejected by 87.4% in grade six and 81.6% in grade twelve.

So while the trend for hallucinogens is for older students to be more exposed to hallucinogens, to be more willing to use them and to have more opportunity than younger students to do so, students in grade twelve still see hallucinogens as fairly dangerous. Even those who do not reject outright the idea of future use generally see it as nothing more than a possibility.

Like cannabis, the tendency for the age of first use of hallucinogens to be within the two years prior to the survey can be seen clearly in Table 98. The small number of users in each grade must again be noted, and interpretation of the within grade percentages should be made with great caution.

A significant grade effect for current use of hallucinogens can be seen for females but not for males in Table 99. An average of 2.0% of males currently use hallucinogens in some form while the percentage for females varies from zero in grade six to 5.1% in grade twelve giving an overall average of 1.0%. This figure of 5.1% for grade twelve girls is markedly inflated when compared with those for the other grades and may be simply a result of the particular nature of the grade twelve sample of girls. Overall, the sex difference is not significant ($\chi^2 = 5.20$; $df = 1$; $p > 0.01$). The current hallucinogen use figures for the total sample range from 0.2% at grade six to 4.6% at grade twelve.

Table 100 shows that again, over half the users of hallucinogens use them once a month or less. As McGlothlin (1975) points out in his review, tolerance to hallucinogens occurs very rapidly and these drugs cannot be regularly used more than about once or twice a week without losing much of their impact. The percentage of high frequency users reported in Table 100 thus seems rather inflated and is probably due to exaggeration on the part of a minority of survey respondents. Again the warning should be sounded that extreme drug use figures should be treated with caution. As seen in Table 103, hallucinogens found growing naturally, probably mainly in the form of the mushrooms Psilocybe Cubensis ("Gold Tops") and Copelandia Cyanescens ("Blue Meanies"), are a major source of supply. The general pattern seems to be for a user to eat several quantities of mushrooms during a "using" day and it may be that the students indicating their current frequency of use to be "once a day or more" interpreted the question in this way.

The comparison of the percentages of students who report: (a) that they have used hallucinogens at some time; (b) that they currently use hallucinogens; and (c) and that they regularly use hallucinogens can be seen in Figure 8. Grades were combined because of the small number of hallucinogen users. Again it is clear that only a small proportion of those who have ever tried hallucinogens have continued as regular users.

Almost half the current users believe that the amount of hallucinogens they usually use is about the same as other hallucinogen users, while 42.5% believe that they use less than most other users. This can be seen from Table 101.

Table 102 indicates that just less than half the students currently using hallucinogens report that they have decreased their frequency of use in the past six months while a further third report that they have not changed their frequency of use in that time.

The usual sources of hallucinogens for the students are indicated in Table 103, with friends and naturally growing plants being the most common. Comprehension difficulties could have occurred for the younger students here. It may be that the definition of hallucinogens as including "magic mushrooms" was not clear enough to enable the younger students to distinguish them from the usual type of mushrooms commonly served in meals at home. This, combined with the few self-reported users in these grades and the fact that parents were indicated as the usual source of hallucinogens almost exclusively by primary students, undoubtedly served to severely inflate the overall percentage for that particular alternative. It is interesting to note that the percentage of users reporting that their usual source of supply is a dealer in drugs is higher for hallucinogens than for any other drug except narcotics.

As seen in Table 104, almost 80% of users consider their parents to be unaware of their use of hallucinogens.

Narcotics

Grade differences on past use of narcotics are not significant for either the total population or for males and females separately. Table 105 shows that 2.3% of males and 1.4% of females report that they have used narcotics at some time. Sex differences are not significant ($\chi^2 = 4.07$; $df = 1$; $p > 0.01$). It should be noted that these percentages might include some students who had been treated medically with a narcotic such as morphine.

As indicated by Tables 106 and 107, the percentage of students who have been offered narcotics increases from 1.8% in grade six to 10.1% in grade twelve, while less than 5% of all students would use a narcotic if it were offered by a good friend.

The narcotics category is the only one in the questionnaire for which the students' perception of danger to health does not decrease significantly with grade. In Table 108 it can be seen that almost three-quarters of all students believe narcotics to be very dangerous while a further 21.4% believe them to be fairly dangerous.

Students include narcotics users among their five best friends in fewer cases than for any other drug type. Table 109 shows that 95.0% of students do not believe any of their five best friends are narcotic users. Similarly, Table 110 shows that the idea of possible personal use of narcotics in one year's time is rejected outright by a higher percentage of students than for any other drug.

The general pattern then, regarding narcotics, is one of recognition of their danger to health and rejection of the possibility of future use.

Very few students in any grade claim to have used narcotics and the percentages in the remaining tables must be interpreted with due caution because of the small sample size.

Table 111 presents age of first use of narcotics, and demonstrates a similar trend to that in parallel tables for other drugs: the ages of first use fall mainly in the two years prior to the survey.

Both current oral use of narcotics and use by injection were considered. Tables 112 and 113 contain no significant grade differences and show that less than 1% of students are current oral users of narcotics and only 0.6% take narcotics by injection. Significantly more males than females claim to take narcotics by injection ($\chi^2 = 8.37$; $df = 1$; $p < 0.01$) but sex differences for oral users are not significant ($\chi^2 = 4.38$; $df = 1$; $p > 0.01$). Table 114 shows the grade and sex distribution of students who report that they use narcotics in any form, either orally or by injection. No significant sex differences appear ($\chi^2 = 5.96$; $df = 1$; $p > 0.01$) and grade differences are also non-significant.

The fact that the number of users within the sample was so small prevents any generalizations being made about the pattern of current narcotic use among the user population as a whole. Reference will thus just be made to the sample of narcotic users.

Tables 115 and 116 show that a larger proportion of the narcotics users indicated a high frequency of use than did users of any of the other drugs. However, Table 117 indicates that a majority saw themselves as using about the same as or less than most other narcotics users each time.

When asked to compare their current frequency of use with that of six months ago, a higher proportion of narcotics users indicated an increase in frequency than did users of any other drug. This is shown in Table 118. Narcotics are of course highly addictive drugs.

Table 119 indicates that friends are once again the most common source of supply of the drug. According to this table, the dealer in drugs was a source of supply for a higher percentage of narcotics users than for users of any other drug. In Table 120 it can be seen that over two-thirds of the student users claimed that their parents did not know that they used narcotics.

Depressants

Grade trends are significant for most of the items relating to depressants, the last of the drug categories considered.

Table 121 shows that the percentage of students in the sample who report that they have used depressants at some time increases with grade from 3.3% at grade six to 11.1% at grade twelve. The

sex difference is not significant ($\chi^2 = 1.50$; $df = 1$; $p > 0.01$). Table 122 shows that contact with depressants, as measured by the percentage of students who have been offered drugs of this type, increases significantly with grade from 3.2% in grade six to 15.3% in grade twelve. The percentage of students who consider it at least possible that they would use a depressant if it were offered by a good friend rises from 4.0% at grade six to 11.7% at grade twelve, as Table 123 indicates. Use of depressants is believed to be less dangerous by the older students: Table 124 shows that 65.9% of grade six children believe that depressants are very dangerous to one's health, while only 28.3% of grade twelve students believe them to be so dangerous. As was found for all other drugs, most students feel that none of their five best friends use depressants. Table 125 indicates that grade differences are not significant on this item. It is interesting to note the similarity of this overall percentage for all six drug types considered. It may be an indication that, in general, a large majority of students do not come in contact with drug users of any kind within their immediate circle of close friends. Anticipated future use of depressants changes slightly though significantly over the grades. It can be seen from Table 126 that the percentage of students who reject the possible future use of depressants outright declines from 86.4% at grade six to 82.0% at grade twelve.

Table 127 shows the age of first use of depressants. The pattern here is similar to that for stimulants with the majority of students reporting age of first use in the two years prior to the survey, and a significant proportion, particularly of high school students, reporting first use at age ten years or less. The effect of the small within-grade sample sizes on the reliability of the grade percentages must be kept in mind once more.

Details on current use of depressants are presented on Table 128. Grade differences are not significant for males but the increase in current use by females, from 0.4% in grade six to 4.2% in grade twelve, is significant at the 0.01 level. However, overall sex differences are not significant ($\chi^2 = 0.24$; $df = 1$; $p > 0.01$).

Figure 9 shows the grade-by-grade comparison of the percentages of students who (a) have ever used depressants; (b) currently use depressants; and (c) regularly use depressants.

Tables 129 and 130 show that almost two-thirds of current users take depressants once a month or less and nearly 10% take them on a daily basis. The usual dosage, for over 60% of users, is one pill each time.

When comparing their present frequency of use with that of six months ago, Table 131 shows that over 88% of current depressant users either use the drugs less frequently now or have not changed their pattern of use in that period.

Parents, a doctor's prescription and the medicine cabinet at home are the most common sources of supply of depressants according to Table 132. It is likely that a significant portion of the reported depressant use is medical or semi-medical use. For example, students could possibly be given sleeping pills or other minor tranquilisers by their parents or could take them themselves from the medicine cabinet on occasions of anxiety or tension. Those students who report that they usually obtain depressants via prescription would include those who fake symptoms in order to obtain supplies of depressants on prescription. Consistent with the inference that a good part of the depressant use is semi-medical use is the fact that, as seen in Table 133, 64.0% of users consider that their parents are aware that they use depressants.

General illicit drug use

Table 134 indicates the percentages of students who have used at least one of the drug types considered in this study. Grade differences are significant for all sections of the table, with a higher percentage of users in the upper grades. In grade twelve, almost one-third of all students have taken some type of drug at some time. Of course, this includes those who have taken depressants or stimulants for medical or semi-medical reasons. The sex differences are significant ($\chi^2 = 14.87$; $df = 1$; $p < 0.001$) with use of drugs being, in general, more widespread amongst males than females, although in grade twelve the percentage of female users is about the same as that for males.

Table 135 presents information on the percentages of students who currently use at least one type of drug. Grade differences for males do not reach the decisive level of significance, but a significant increase over grade is found for females, to the extent that the percentage of users in grade twelve is almost equal for the sexes. The sex difference is significant ($\chi^2 = 9.89$; $df = 1$; $p < 0.01$) with a larger proportion of males currently using at least one drug. The overall increase in the percentage of current drug users is from 6.6% in grade six to 19.4% in grade twelve. It must be remembered again that a proportion of these students would be currently using drugs in a medical or semi-medical fashion.

"To get high" and "to help me relax" are the most common reasons given by users in this study for their current drug use. Table 136 sets out the alternatives in the order in which they were given in the questionnaire. Wanting to feel part of the group is also a popular reason. The order of priority of reasons for drug use does not differ significantly with grade.

Table 137 shows that significant grade differences occur in the reasons given by non-users for not taking drugs. Fear of harm to health, and being able to enjoy life without drugs are reasons given by over 75% of primary school students. The latter reason remains the first choice of at least half the non-users in all higher grades, but as might be expected from the fact that the perceived danger of drugs is lower in the upper grades, the fear of harm to health is of less importance for the older children. This awareness of danger was also found to be a major reason for non-use of drugs in a study by Smart, Fejer and White (1971). In grades eleven and twelve, fear of dependence on drugs and moral considerations are the main reasons given by over 20% of students for their non-use of drugs.

Reported reasons for giving up drugs are similar for ex-users in all grades and they are listed in Table 138. Finding that life can be enjoyable without drugs is the most common reason given. It appears that the presented list of reasons did not cover a wide enough range of alternatives since 24.6% of the ex-users responded with "some other reason". A small percentage of students report that they have experienced harm to their health through using drugs and unavailability of supplies caused a further 9.9% of students to give up use of drugs.

4

PATTERNS OF USE

Table 139 and Figure 10 present the percentages in each grade who have used any of the six types of drugs considered, and Table 140 and Figure 11 present the percentages who use the drugs now.

The high rate of increase in use of cannabis is apparent, together with steadier increases for stimulants, depressants and hallucinogens. Inhalant and narcotic use is seen not to vary significantly with grade either in sometime use or in current use.

It is also obvious from the tables and figures that although cannabis is by far the most commonly tried drug in grade twelve, it does not hold this position for all grades. It is only after grade nine that cannabis is more popular than inhalants. Of the drugs considered, inhalants seem to be uniquely popular among the upper primary school children: more of these students have been offered inhalants than any other drug, more would be willing to use if offered, more see future use of inhalants to be possible, more see inhalants to be less dangerous than other drugs, and more have used or are using inhalants.

A summary of past and present use of alcohol is given in Tables 3 and 141 and in Figure 1. For both past and present use, consumption of alcohol far exceeds use of the illicit drugs. This trend also applies when males and females are considered separately.

Table 142 gives a comparison of past or present drug use in Canberra (Irwin, 1974), in New South Wales (Bell, Rowe, & Caldwell, 1974) and, from the present study, in Queensland. Before any comments can be made a few points about the data must be noted. Firstly, the surveys were not done in the same year and many social conditions can change in a period of three years. The "ever used" figure for marijuana in New South Wales increased from 11.5% in 1971 to about 20% in 1973 (R. Champion, personal communication, May 21, 1975). The increase for hallucinogens was not as great – from 5.1% to 6.0%. Secondly, the estimated average ages of students in the various grades do not correspond exactly. Students in Form 5 of the Canberra study, in their second last year at secondary school, are actually closer in age to Queensland's final year students (twelfth graders) than are the sixth form (final year) New South Wales students. The general pattern of increasing drug use with increasing grade found in the present study must thus be considered here.

Overall, the Queensland figures differ very little from those in the Canberra study except in the case of alcohol and hallucinogens where the figures in the present study are noticeably higher. The difference for hallucinogens could be due to the greater availability of naturally occurring hallucinogens in Queensland in the form of psilocybe mushrooms. The difference in alcohol use may partly be due to the wording of the relevant items in the respective questionnaires. The item used in the Canberra study was "How would you describe your use of alcohol?" with response categories of "use now", "used to use", and "never used". The corresponding item in the present study was "Have you ever had an alcoholic drink, other than on religious occasions?" with responses of "yes, only once to taste", "yes, more than once", and "no". Responses for the first two categories in each study were combined for the purposes of Table 142, but clearly many Canberra students who had had alcohol only once to taste may not have marked even their "used to use" category. Thus the Queensland figure here would be comparatively inflated. If "tasters only" are not included in the figure for Queensland, the percentage drops to 86.8%, much closer to the Canberra figure.

The New South Wales figures (Bell et al., 1974) do not compare as readily with either of the other studies, especially in the case of depressants and stimulants. The most likely explanation for the far

higher reported incidence of stimulant and depressant use in New South Wales lies in the fact that in that study use of all drugs was specifically defined to include those obtained on prescription from a doctor. This would have had a powerful inflationary effect on the incidence figures for stimulants and depressants. It is worth noting here that these figures indicate a widespread use of drugs among students in socially acceptable ways. In the Canberra and Queensland studies, no direct mention of medical use was made and the majority of students would have treated the survey items as dealing with illicit use only.

The research findings on sex differences in the use of specific drugs are not consistent. Smart and Fejer (1972) report that significantly more males than females use all drugs except tranquilizers, barbiturates, inhalants and stimulants. No significant sex differences appeared with the last three drugs, while more females than males used tranquilizers. Lavenhar and Sheffett (1973), however, found that use of drugs for other than medically approved reasons was not associated with the sex of respondents. Hager, Vener and Stewart (1971) found significant sex differences for each drug considered – marijuana, hallucinogens, amphetamines and hard drugs. The present study found sex differences only for past and current use of cannabis and inhalants, and for current use of narcotics by injection. In each case, there are more male than female users. As Tables 134 and 135 indicate, significantly more males than females also indicate use of at least one drug, either currently or at some time in the past. The present study clearly adds to the confusion about sex patterns in drug use: it is evident that differences between the sexes in the pattern of drug use are largely determined by local conditions. The position is clearer for alcohol. The present study supports the general finding that alcohol use is more widespread among males than among females (Davies & Stacey, 1972; Harrison et al., 1970; Smart, 1970).

Table 143 shows the most popular combinations of drugs currently used by the sample. Only drug combinations that are used by ten or more students in one of the grade groups are included in the table. The percentage using only alcohol almost doubles from the primary to the upper high school grades, while the percentage who currently use neither alcohol nor drugs decreases from 57.7% in the primary school to 18.1% in the senior high school. While alcohol and inhalants is the most popular combination for the younger students, it is supplanted by alcohol and cannabis among older students.

Current frequency of alcohol consumption and of single or multiple drug use is shown in Table 144. Drug users are classified as regular users if they currently use at least one of the six types of drug more than once a month. Current alcohol users are similarly classified as regular or occasional drinkers. Except in grade six, students who use only one drug are occasional rather than regular users. The aberrant grade six result is probably due to exaggeration by the self-proclaimed users. For all grades, multiple drug users are more often regular users. Breadth of drug experience thus means a greater depth of involvement with at least one drug. Almost two-thirds of grade six students use neither alcohol nor drugs. This percentage drops to 14.8% by grade twelve. Most of the increase in use over grade occurs for use of alcohol only: from 27.6% at grade six to 65.5% at grade twelve. The sharper increase however occurs for regular rather than occasional use of alcohol only.

Opportunity for use of drugs, as measured by the percentage of students who have been offered the drugs, increases over grade for all drugs except inhalants, reaching a peak of 25.7% for cannabis in grade twelve. However this is less than half the percentage of students in grade six who had been offered alcohol. Having been offered a drug may indicate, to some extent, the strength of peer group pressure towards its use.

The maximum willingness to use drugs is reached in grade twelve where only 64.8% report that they would reject the offer of cannabis, and 64.6% similarly report that they would reject stimulants. Students differentiate among drugs more with age: willingness to use narcotics if offered does not change significantly with grade, but willingness to use cannabis and stimulants increases sharply with grade. Willingness to use other drugs also increases but less sharply. It is interesting to note that at the primary school level, differentiation of "hard" from "soft" drugs is greater when students are asked whether they would be willing to use the drugs than when they are asked to rate the drugs in terms of danger to one's health. As might be expected, willingness to use alcohol is far greater than that for any other drug at any grade.

Willingness to use a drug and the perceived danger of the drug are closely related variables and in this study they show highly similar trends over grade. Figure 12 demonstrates these grade changes in perceived danger of various drugs. The younger students seem to be aware of little difference in danger between

the different drug types and to see them all as very dangerous. Older students tend to estimate the danger a little more realisitcally. In the higher grades, the substances seem to fall into four groups. The first consists of narcotics and hallucinogens which are seen as very dangerous by most students in all grades. Inhalants, stimulants and depressants form another group. Older students see them as less dangerous than do younger students though most still treat them with caution. Cannabis stands out among the drugs, showing the most decisive drop over grade in perceived danger. From being rated the most dangerous of all drugs by seventh grade students, it is seen as the least dangerous by those in grades eleven and twelve. This finding that cannabis is perceived to be less dangerous than other illicit drugs is common to many studies (Yancy, Nader, & Burnham, 1972; McGlothlin, 1975; Fagerberg, Young, Sanders, McGoskill, Leardon, & Beach, 1973). Alcohol here is clearly in a class of its own: it is thought to be decreasingly dangerous by more and more students in each grade, and at each grade alcohol is perceived to be substantially less dangerous than the other drugs.

The students were asked whether they would be using the drugs in one year's time. The percentage of students who did not reject this possibility increased significantly with grade for alcohol and for all drugs except inhalants and narcotics. The greatest increase in anticipated use occurred for alcohol, but among the drugs, the greatest increase occurred for stimulants and cannabis, and the least, apart from inhalants and narcotics, occurred for hallucinogens. In general, a higher percentage of students within each grade believe it possible that they will be using a drug in one year's time than have ever used it. This is true for alcohol only if "ever used" is taken to mean "ever used more than once to taste". At any grade, use of alcohol is anticipated by many more students than is use of any of the drugs.

Bell et al. (1974) asked a similar question in their study of New South Wales subjects. When the percentages of New South Wales students who do not anticipate future drug use are compared with those presented here, two trends emerge: more Queensland grade twelve students anticipate hallucinogen use than do New South Wales sixth form students; and fewer Queensland students anticipate use of any of the other drugs. These trends may partly be explained by the fact that the New South Wales study specifically included prescribed medical use of drugs, and partly by the fact that the present study referred specifically to use in one year's time while the New South Wales study referred to the indefinite future. The aberrant result for hallucinogens may reflect the greater emphasis in the present study on naturally occurring hallucinogens such as psilocybe mushrooms and datura.

For all drugs except hallucinogens and cannabis there is no significant change over grade in the number of the student's five best friends who use the drug. For cannabis and hallucinogens, the number of friends who are users increases with grade. However, for all drugs, a large majority of students in all grades do not number any drug users in their circle of five best friends. The number of close friends who use a drug may be seen as a crude measure of the extent of a student's contact with the drug, and of the degree of peer group pressure to use the drug. It is reasonable then that the percentage of students saying that none of their five best friends use alcohol if far lower than for any of the illicit drugs. This again reflects the widespread acceptance of alcohol by young people.

For all drugs, a high proportion of users report that they first used the drug within the two years immediately prior to the survey. There is some tendency for age of first use of inhalants, stimulants and depressants to be lower than that for the other drugs. This is probably due to the ease of access to these drugs through legitimate channels, and to the higher use of stimulants and depressants in a semi-medical fashion under the supervision or with the approval of adults.

There seems to be little reliable variation among drugs in the reported frequency of use. For all drugs, at least half of the users take the drug once a month or less. Similarly, most users report that they take only a small or moderate amount of the drug each time. For a significant proportion of users then, their involvement with drugs is quite minimal. The use of alcohol is more than minimal however: drinkers take alcohol more frequently than drug users typically take drugs. While a significant proportion of drug use appears experimental, this is not so for alcohol. Drinking for the students is an established pattern of behaviour particularly in the senior high school years.

The findings of this study thus tend to confirm McGlothlin's (1975) point that the predominant pattern of drug use is one of infrequent usage of small quantities which, he says, reflects the fact that most individuals are participating in a fad or style rather than being primarily attracted by the pharmacological properties of the drug. Lavenhar and Sheffett (1973) ascribed the recent general increase in the use of drugs mainly to increased experimentation by young people, and did not see a proportionate

increase in regular or frequent use of a wide variety of drugs. The authors indicated that marijuana may be the exception to this rule.

Usually, when comparing their present frequency of use with that six months ago, 80% or more claim to be using the drug less often now or that their frequency of use has not changed. For all drugs except narcotics a lower percentage of users say they are using less frequently now than say they are using more often. In all, 43.3% of narcotics users say that their use rate has increased in that time. Narcotics are of course highly addictive drugs. It is interesting to note however that cannabis at 28.2% is the drug with the next highest percentage of users who report that they are using it more frequently now.

The percentage of drinkers who report that their drinking frequency is unchanged from six months ago is greater than the corresponding figure for any of the six types of drugs. It is possible that a student's frequency of use of alcohol is more stable over short periods of time than is his frequency of use of any of the drugs. This is consistent with the interpretation that a significant percentage of drug users are experimental users and belong only temporarily to the population of drug users. Narcotic and cannabis users are apparently more likely than are other drug users to become more committed with time to their drug.

Friends are the most common source of cannabis, stimulants and hallucinogens. Alcohol is usually obtained from parents, although some drinkers obtain the drink from their friends. The main sources of inhalants are kitchen cupboards or shops. Depressants and stimulants are obtained on a doctor's prescription or from parents by a notable proportion of users. Of course it is accepted that some users of these latter drugs visit several doctors and readily feign symptoms in order to obtain prescriptions. However some stimulant and depressant use would be for licit medical or semi-medical purposes.

Semi-medical use of stimulants and depressants could account for their being the only drugs for which over half the users claim that their parents are aware they use it. These proportions are much lower for the other drugs, dropping to about one in six for cannabis.

5

KNOWLEDGE AND ATTITUDES

Alcohol knowledge

The twenty alcohol knowledge items were submitted to item analysis. The alpha coefficient of internal consistency (Cronbach, 1951) is 0.57. Each item was scored as zero if the answer was incorrect or missing, and as one if correct. Only those items whose correlation with the sum of twenty items was equal to 0.3 or greater were accepted as items on the alcohol knowledge scale. In all, fifteen alcohol knowledge items fulfilled this criterion and were thus selected.

A two-way analysis of variance was computed on the alcohol knowledge scale. Table 145 shows that there are significant grade and sex effects. Examination of Table 146 reveals that as might be expected from previous research (Nelson, 1968), males score higher than females on alcohol knowledge. It seems likely that the boys' greater interest in and experience of alcohol would account for this difference, which, although significant, is slight. Table 146 also shows that alcohol knowledge increases substantially with grade, from 8.3 at grade six to 12.1 at grade twelve. The grade six average score is only very slightly above what might be expected if the students responded randomly to the items.

Table 147 gives, for each alcohol knowledge item, the percentage in each grade who gave a correct answer. The χ^2 refers to a χ^2 analysis of grade by response. The degrees of freedom for this analysis is thus six. Table 147 also shows the correlation of each item with the sum of all twenty items.

Some interesting points about individual items may be noted. Nearly 60% of students in grade six consider alcoholism and drunkenness to be the same. This figure drops dramatically to 6.3% at grade twelve. A popular misconception among the younger students which is still relatively common at the older age level is that hangovers always occur after drinking alcohol.

Only two items selected for the alcohol knowledge scale show no grade differences for correct responses. Over all grades, almost half of the students are unaware that alcohol does not have the same effect on a big person as on a small person. Across grade, a consistent majority of students (70.2%) know that an eight ounce glass of beer will have about the same effect as a one ounce shot of rum.

Drug knowledge

The twenty drug knowledge items were submitted to an item analysis in the same way as were the alcohol knowledge items. The alpha coefficient of internal consistency is 0.55. In this case, sixteen items correlated 0.3 or greater with the sum of all drug knowledge items. These sixteen items were thus selected to form the drug knowledge scale.

Table 148 shows that a two-way analysis of variance on the drug knowledge scale produced a significant grade effect, but no significant sex difference on the drug knowledge scale. Table 149 indicates that the average drug knowledge score increases substantially with grade, from 8.8 items correct at grade six to 13.0 correct at grade twelve. Since the maximum possible score is sixteen, it is clear that the average score of the younger students may be accounted for simply by assuming that the

younger students responded randomly to the drug knowledge items.

Details on individual drug knowledge items are set out in Table 150. The table shows the percentage who correctly answered each item in each grade, and the correlation of that item with the sum of all twenty drug knowledge items. As for the alcohol knowledge scale, the χ^2 values refer to chi-square analyses of grade by item response for each item. A notable feature of Table 150 is the increase over grade in the percentage of students aware that not all drug users become dependent on drugs. That nearly 80% of grade six students see all drug use as leading to dependence is consistent with their high and undifferentiated rating of the danger to health of use of the six drug types used in this study. A large and increasing majority of students in each grade are aware of the danger of drinking alcohol after taking barbiturates. Only 3.8% in grade twelve consider this practice to be safe.

A significant grade trend occurs for all except one of the items included in the drug knowledge scale: overall, approximately two-thirds of students are aware that depressants such as the barbiturates are used by doctors to help people sleep. In every case except one, the significant grade trend for individual items is towards greater knowledge with grade. The exception is the item "'Snow' is heroin", for which significantly more younger than older students gave the required "false" response. It is possible that the slang term was not recognized by the younger students and that they interpretated the word "snow" quite literally. This item also has the lowest item total correlation of all drug knowledge items, and it would be best to assume that the item does not in fact measure drug knowledge.

Although drug or alcohol knowledge is essential in making reasoned decisions on personal drug use, the importance of increasing the students' knowledge about alcohol and drugs in order to change their behaviour should not be over-emphasized. Stacey and Davies (1973) for example, evidencing studies by Evans, Rozelle, Lasater, Dembroski and Allen (1970) and Kothandapani (1971), make the point that efforts to increase drug or alcohol knowledge among students, or to influence their attitudes, will not automatically or typically effect changes in overt behaviour.

Alcohol attitudes

The 34 alcohol attitude items were submitted to a principal components analysis and the four factors with eigenvalues greater than one were rotated using the varimax criterion. This statistical technique groups the attitude items into sets that measure the same thing. It thus creates a small number of more general attitudes (in this case towards drink) which are easier to understand and interpret. Only those items whose correlation with a factor is greater than 0.4 are used to describe the factor in this report. The number in brackets after each item refers to its position in Table 151. Table 151 gives the individual alcohol attitude items and the percentage in each grade that agree with the item. The χ^2 values refer to analyses on individual items of grade by attitude. Attitudes were measured by a five point scale (strongly agree to strongly disagree), and thus the degrees of freedom is equal to 24 for each analysis.

The first factor seems to measure the degree of approval of infrequent or controlled drinking and is thus labelled *approval of moderate drinking*. The items that load on this factor, and their correlation with the factor, are:

There is nothing wrong with having a drink or two on social occasions such as parties or picnics (12).	0.69
There is no harm in having a glass or two of beer after a hard day's work (13).	0.67
A drink once in a while does no harm (14).	0.63
There is nothing wrong with drinking, if you know when to stop (15).	0.61
It is alright to have a glass or two of wine with meals (16).	0.58
There is nothing wrong with drinking (17).	0.54
Alcohol is bad only when people misuse it (18).	0.54
Most people can drink sensibly (19).	0.50

The higher the item/factor correlation the more central that item is to the definition of the factor. In this case, the factor accounts for 10.9% of the variance of the alcohol attitude items. There is generally a high and increasing level of agreement with these items over grade, indicating a widespread tolerance towards the moderate use of alcohol.

The second factor is labelled *beneficial effects of drinking*, since the items that load on it are:

Drinking makes you feel good (22).	0.67
Drinking helps you have fun (23).	0.63
Alcohol makes a party go better (24).	0.62
Drinking can make sad people feel happy (25).	0.61
You get on better with people after a drink or two (26).	0.60
Drinking makes you more self-confident (27).	0.58
People who do not drink miss something enjoyable in life (7).	0.52
You feel left out of things at parties if you don't drink (8).	0.41

This factor accounts for 10.5% of the variance of the alcohol attitude items. Quite marked increases occur over grade in the percentage of students agreeing with these items. This seems to indicate a growing acceptance with age of alcohol as a pleasant and useful beverage. The importance of the peer group for the students is emphasized by the increasing proportion of students who feel that drinking helps them to feel good and have fun, and not to feel left out of things.

The items that load on the third factor, labelled *disapproval of non-drinkers*, are:

People who refuse a drink are anti-social (1).	0.64
Women who drink are more sophisticated than women who do not drink (2).	0.62
You cannot trust people who will not drink with you (3).	0.59
Men who do not drink are not real men (4).	0.56
To be able to drink a lot is a sign of being grown up (5).	0.53
People who don't drink at parties are wet blankets (6).	0.53

This factor accounts for 9.1% of the total variance of the alcohol attitude items and clearly also measures approval of drinkers. The percentages of students who agree with these items are generally low and typically decrease with grade. Increasing tolerance with age towards non-drinkers thus seems to be indicated.

The items that correlate highly with the fourth factor causing it to be labelled *antipathy to heavy drinkers*, are:

People who drink a lot should be fired from their jobs (29).	0.64
There is nothing worse than a person who drinks a lot (30).	0.61
Alcoholics should not be allowed to bring up children (31).	0.59
I would not like to be the friend of a person who drinks a lot (32).	0.54
Alcoholics should be put in jail (33).	0.52
People who drink a lot should not be allowed to drive cars (11).	0.49
Teenagers who drink have had a poor bringing up at home (34).	0.47
Public drinking is disgusting (21).	0.42
The world would be a better place without alcohol (28).	0.40

This factor accounts for 8.8% of the variance of the alcohol attitude items. Those students who score highly on this factor have an extremely intolerant attitude to excessive drinkers and alcoholics. It should be noted here that, as item 1 in Table 147 indicates, nearly 60% of grade six students see no difference between drunkenness and alcoholism. This lack of differentiation is also reflected in the grade six responses to items 29 and 33 in Table 151: similar percentages of students react negatively

towards alcoholics and towards people who drink a lot. The extreme view that alcoholics should not be allowed to bring up children is supported by 43.9% of sixth graders and by a surprisingly high 45.6% of grade eleven students. There is very little change over grade in response to this item.

On each factor scores have been arbitrarily standardized so that zero represents an "I don't know" response. Thus a negative score indicates disagreement with the attitude represented by the factor, and the more positive the score, the greater the extent of agreement with the factor. The standard deviation of the scores on each factor was set to ten.

The effect of grade and sex on the four alcohol attitude factors was examined using two-way analysis of variance. Table 152 indicates that males and females do not differ on their attitude to moderate drinking. There are significant differences over grades however. Examination of Table 153 reveals that in fact very few students do not approve of moderate drinking. An attitude of disapproval is found only in grade six.

When a similar analysis is done on the beneficial effects of drinking factor, there are both grade and sex differences as Table 154 indicates. Table 155 shows that generally, few beneficial effects are seen by students in grades six to eight. In higher grades it is apparent that students, particularly boys, see benefits in drinking.

Table 156 reveals that the analysis of the disapproval of non-drinkers factor is more complex. Not only are there significant sex and grade effects on this factor but sex and grade interact significantly. Figure 13 shows the relationship given in Table 157. It should be noted here that the more negative the score, the greater the acceptance of non-drinkers. Thus it is clear that only in grade six is disapproval very pronounced and with increasing grade, this disapproval virtually disappears. The female students consistently show less disapproval of non-drinkers than do males and this difference increases with grade: the gap is only minor at grade six but large by grade twelve. Thus, the older students are more likely than are the younger to approve of those who do not conform to the adult norm of drinking, while the girls are consistently and increasingly more approving of such deviance.

Only grade influences antipathy to heavy drinkers as Table 158 shows. Table 159 indicates that antipathy to heavy drinkers tends to disappear above grade eight. The fact that the younger students are more intolerant both of non-drinkers and excessive drinkers than are the older students seems to suggest that the younger students are, on a wide variety of attitudes, more likely to adopt a rigid, black–white posture.

Drug attitudes

The 34 drug attitude items were submitted to a principal components analysis. Six factors were derived with eigenvalues greater than one. These six factors were then rotated using the varimax criterion. Only five factors were interpretable and only these were used for further analysis. The number in brackets after each item refers to its position in Table 160 which gives the percentage of students in each grade who agree with each drug attitude item. The χ^2 values in this table refer to analyses done on individual items of grade by agreement with the item. Since agreement is measured on a five point scale (strongly agree to strongly disagree) the degrees of freedom for each analysis is 24.

The first factor is labelled *antipathy to drug users* since items giving correlations greater than 0.4 with the factor are:

Drug addicts should be put in jail (1).	0.67
You cannot trust people who take drugs (2).	0.67
People who take drugs are mentally sick (3).	0.63
People who take drugs should be fired from their jobs (4).	0.61
Only fools get 'hooked' on drugs (5).	0.56
Once a person has become addicted to drugs, there is little that can be done for him (6).	0.52
You have a greater chance of taking drugs if you mix with 'bad' people (7).	0.50

Most heavy drug users don't have any real friends (8).	0.49
Drug addicts should not be allowed to bring up children (9).	0.48
The use of marijuana ('pot', 'grass') leads to mental illness (10).	0.41

This factor accounts for 10.7% of the variance of the drug attitude items. Percentages agreeing with the above items are generally fairly high but decrease over grade. In grade six, nearly two-thirds of the students believe drug addicts should not be allowed to bring up children. In grade twelve, 42.1% agree with this. A large proportion of students, averaging 56.9% over all grades, consider that only fools get 'hooked' on drugs.

The items that load on the second drug factor, labelled *beneficial effects of drug taking*, are:

Many drugs are enjoyable to take (11).	0.64
Pep pills are great for kicks (12).	0.63
Pep pills can be a real help in getting you over a crisis (13).	0.60
Some drugs help you understand yourself (14).	0.57
Drugs are good because they make you self-confident (15).	0.50
Drugs are alright if only taken once in a while (16).	0.43
Drugs are an aid to creative people (17).	0.42

This factor accounts for 9.2% of the total variance of drug attitude items. None of the items that load significantly on this factor elicit agreement from more than one in five of the students.

The items that load on the third factor, labelled *approval of experimental drug taking*, are:

There is nothing wrong with trying a drug once (23).	0.65
People have a right to experiment with drugs if they wish to do so (32).	0.62
You need to try a drug to know what it is all about (20).	0.45
Drugs are all right as long as you don't allow them to get a hold on you (21).	0.44

This factor accounts for 7.5% of the variance of the drug attitude items. About one in three of the older students think that there is nothing wrong with trying a drug once, and that one has to try a drug to know what it is all about. The percentage who believe that people have a right to experiment with drugs if they wish to do so increases from 35.9% in grade six to almost 60% in grade twelve.

The fourth drug attitude factor is labelled *no danger in drug taking*, having the following significant component items:

It would be fine to take drugs if it were not for the police (24).	0.50
I would be interested in smoking marijuana if I were sure I wouldn't get caught (18).	0.45
Any new experiences from drugs are not worth the risk (25).	−0.57
It would worry me if my friends were taking drugs (26).	−0.60
You should use drugs only when your doctor says to use them (27).	−0.66

This factor accounts for 6.6% of the variance of the drug attitude items. The factor is bipolar: those items that express lack of belief in the danger of drugs correlate positively with the factor, while those that express a definite belief in the danger correlate negatively. Senior students generally express more liberal attitudes towards drug use, though there is still a large proportion who believe it is best to limit use to that which is medically prescribed. Nearly one in four grade twelve students report that if the fear of reprisals were removed, they would be interested in experimenting with marijuana.

The items that load on the fifth, and final drug attitude factor, *disapproval of non-drug users*, are:

People who refuse to take drugs are real phonies (28).	0.63
You cannot trust people who do not take drugs (29).	0.56
There is a lot to admire in people who take drugs (30).	0.55
People who don't take drugs are too scared to take them (31).	0.52
You feel left out of things if you don't take drugs (22).	0.51

This factor accounts for 6.3% of the variance of the drug attitude items. An inspection of the items that load heavily on the factor reveals that the factor also measures approval of drug users. For most of the items, the percentage of students who agree is low and decreases with increasing grade, indicating again an increase in tolerance with age.

Two-way analyses of variance were undertaken on the five drug attitude factors. Table 161 indicates that both grade and sex significantly influence antipathy to drug users. The factor score means reported in Table 162 show that antipathy to drug users declines with grade and by grade twelve, very little of this extreme attitude persists. Girls are less antipathetic towards drug users than are boys. Girls and older students are thus more tolerant of drug users than are others. Tables 163 and 164 show that there are no significant grade differences in perception of the benefits of drug taking. Female students are however significantly less convinced than are the boys that drug taking has beneficial effects. In fact while, generally speaking, boys in grades ten and above can see some beneficial effects, girls in all grades tend to see no beneficial effects in drug taking.

Approval of experimental drug taking differs significantly with grade, as Table 165 shows. However, an inspection of Table 166 reveals that there is no simple interpretation of the grade difference: no clear grade trend emerges. The difference between grades six and seven exemplifies this. Grade six students show the greatest approval of experimental drug taking, while those in grade seven show the least. This lack of a clear grade trend is possibly due to the relative unreliability of the factor scores since this factor has fewer attitude items loading significantly on it than any other factor. There is both a significant grade effect and a significant sex effect on the no danger in drug taking factor, as Table 167 reveals. Table 168 indicates that the younger children see greatest danger in drug taking, and that while boys tend to see significant danger in drug taking until grade eight, the girls remain convinced of the significant danger until grade ten.

Table 169 and 170 indicate that the older children show less disapproval of non-drug users than do the younger and that boys generally show less tolerance than do girls. Table 170 also shows that except for students in grade six, the school children approve of non-drug users.

6

CONCLUSIONS

The percentage of students who have at least tasted alcohol increases from 68.9% at grade six to 96.0% at grade twelve. In addition to greater use of alcohol, older students have had more opportunities to take alcohol than have the younger students, more of their friends drink and they express a greater willingness to accept a drink if offered. While one-third of grade six pupils believe alcohol to be very dangerous to their health, only 2.7% of grade twelve students believe this to be so.

Table 141 presents a summary of current use of beer, spirits, wine and liqueurs. The rates of increase with grade of current use of beer, wine and liqueurs are essentially the same, and less than that for spirits.

Frequency of consumption tends to increase with grade for drinkers of beer and spirits, to decrease for liqueur drinkers and to remain unchanged for wine drinkers. Beer is drunk by a lower proportion of senior students than are spirits, but beer is drunk more frequently and more heavily. A higher percentage of males than females are drinkers, especially in the case of beer consumption. This reflects to some extent the wide acceptance in Australia of the image of the adult male as a heavy drinker.

Most students who drink begin doing so at home, in the company of their parents, before they reach their twelfth birthday. Modal age of first use in this study is ten years or less. Older drinkers tend to do more of their drinking in the company of peers, in situations outside the home than do younger drinkers. As might be expected from these two findings, parents are generally seen by the drinking student as being aware that he drinks, but not always aware of the amount he drinks.

More older students try to drink at hotels while under age than do younger students, but fewer have been refused service. The recent lowering of the legal age limit from 21 to eighteen years would probably be an influencing factor here, since younger students would now find it easier to pass as teenagers legally entitled to drink in a hotel.

The older students more often report having been drunk or ill from drink, having lost their memory or behaving atypically after drinking. There is, however, no significant change over grade in the small percentage of students who report having been in trouble with the law over drink. The kind of legal trouble would not necessarily be the same for all age groups, of course. Whereas younger students may have been warned by police about, for example, underage drinking, older ones may have experienced more serious encounters.

The importance of the peer group for adolescents is revealed by the significant proportion of older students who say their main reason for drinking is that it enables them to mix more easily and to relax and be happy. Younger students who drink report they do so mainly because they like the taste.

Six categories of drugs were examined in this report: cannabis, inhalants, stimulants, hallucinogens, narcotics and depressants. Use of all drugs except inhalants increases markedly with grade.

After alcohol, cannabis is the next most popular substance in the high school years. A total of 17.6% of grade twelve students have used cannabis. An average of 6.5% of all students have used inhalants at some time. This percentage of inhalant users is consistent across grades. Inhalants are definitely the most widely accepted drug type among the younger students. Young students believe inhalants to be less dangerous than other drugs, express more willingness to use inhalants if offered, and see future personal use of inhalants as more of a possibility than for any other drug.

Sex differences in use occur for only a few drugs. Cannabis, inhalants and injected narcotics are currently used by a higher percentage of males than females in this study, but few consistent sex differences in patterns of drug use occur in the literature. It is concluded that local conditions largely determine differences between the sexes in patterns of drug use.

The most commonly used combinations are alcohol plus inhalants for younger students, and alcohol plus cannabis for those at high school. Their use or non-use of alcohol aside, students who use only one type of drug tend to be occasional rather than regular users. Multiple drug users are more often regular users.

Younger students perceive little difference in the danger to health of the various drugs, tending to see them all as very dangerous. Though they generally express unwillingness to try drugs, this lack of discrimination could well be a problem were they in a situation where both "hard" and "soft" drugs were available. Older students tend to rate the danger more realistically. Narcotics and hallucinogens are, however, still seen as very dangerous at this grade level. The older students regard inhalants, stimulants and depressants to be less dangerous than do the younger students, but they still treat the drugs with caution. Among all drugs, the most decisive drop in perceived danger over grade occurs for cannabis, while alcohol is seen by students in all grades to be far less dangerous than any of the proscribed drugs.

Most drugs are obtained from friends and the fact that drug users generally claim to have begun use recently may indicate increasing availability and acceptance of drug use among school children. However the general pattern seems to be one of infrequent use of small quantities rather than widespread heavy involvement in the "drug scene".

Both alcohol and drug knowledge increase significantly with grade. Males score slightly higher than do females on an alcohol knowledge scale but no significant sex difference was found on the drug knowledge scale. Grade six students seem to have scored only slightly above what they could have achieved by guessing.

Four general attitude factors were derived from the 34 alcohol attitude items and were labelled as follows:

Approval of moderate drinking
Beneficial effects of drinking
Disapproval of non-drinkers
Antipathy to heavy drinkers

There is little or no disapproval of moderate drinking by students in any grade and though some antipathy is shown towards heavy drinkers by students in grades six to eight, this attitude is not common among the older students. Males are generally more likely to perceive beneficial effects of drinking than are females.

A general impression derived from the analyses of these alcohol attitude factors is that drinking is a pleasant and socially acceptable activity for most students, particularly those in the senior high school grades. With increasing grade, girls are consistently and increasingly more tolerant of those who do not conform to this norm of drinking than are boys.

The five attitude factors isolated for drugs were labelled as follows:

Antipathy to drug users
Beneficial effects of drug taking
Approval of experimental drug taking
No danger in drug taking
Disapproval of non-drug users

From grade nine on, the students, particularly the girls, show little or no antipathy to drug users. While the girls in all grades see no beneficial effects of drug taking, senior high school boys believe that there are some beneficial effects. Younger students more than older, and girls more than boys, see danger in drug taking. Very little disapproval of non-drug users is present at any grade level.

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TABLE 1

Characteristics of the Sample of School Children

Number in Sample	Grade							Total
	6	7	8	9	10	11	12	
Unweighted N	530	458	519	500	447	428	480	3362
Weighted N	634	618	612	579	522	222	201	3388

Age	Grade Mean							Weighted Average
	6	7	8	9	10	11	12	
Average age in years	11.3	12.2	13.2	14.2	15.2	16.1	17.0	13.6

Sex	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Male	52.4	53.8	44.5	42.5	61.8	49.1	54.8	50.9
Female	47.6	46.2	55.5	57.5	38.2	50.9	45.2	49.1

Religion	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Protestant	42.4	51.2	41.1	43.7	50.1	45.9	40.5	45.3
Catholic	29.5	31.3	31.1	30.1	20.4	34.1	36.7	29.5
Jewish	0.6	0.9	0.2	0.8	0.4	0.7	0.6	0.6
Other	25.5	13.8	22.6	20.2	20.9	10.6	11.3	19.4
None	2.1	2.8	5.0	5.2	8.1	8.7	10.9	5.2

Status of Father's Occupation[a]		Grade Percentage							Weighted Total Percentage
		6	7	8	9	10	11	12	
(highest)	1	3.6	1.1	1.1	1.5	2.1	4.9	2.5	2.1
	2	6.4	5.0	4.1	5.6	8.0	11.0	12.6	6.5
	3	9.6	6.4	6.9	10.5	7.5	15.2	10.8	8.8
	4	20.0	20.8	24.5	26.6	17.4	23.3	25.3	22.2
	5	27.9	29.1	28.4	23.6	29.9	26.0	28.0	27.6
	6	23.8	29.1	24.9	23.2	28.0	13.7	15.1	24.4
(lowest)	7	8.6	8.5	10.1	9.0	7.1	5.9	5.6	8.3

[a] Status according to Congalton's (1969) 7-point scale.

TABLE 1

Characteristics of the Sample of School Children (cont.)

Location of School Attended	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Metropolitan	42.8	38.0	47.0	49.5	50.3	55.7	52.0	46.4
Town over 30,000	18.4	16.4	19.3	15.0	16.9	17.2	20.7	17.4
Town under 30,000	18.0	29.0	28.9	29.9	30.6	22.4	17.3	26.2
Country	20.8	16.6	4.8	5.6	2.2	4.7	10.0	10.0

Type of School Attended	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Government	82.2	73.4	76.7	74.9	85.8	66.8	62.8	76.8
Catholic	13.4	26.6	19.5	20.0	5.8	29.2	29.2	18.9
Non-Catholic Independent	4.4	0.0	3.9	5.0	8.3	4.0	7.9	4.4

TABLE 2

Comparison of Sample and Population Characteristics

		Number of Respondents in Each Grade							Total
		6	7	8	9	10	11	12	
Sex[a]									
Male	Observed	331	332	273	246	322	109	110	1723
	Expected	321	320	311	293	266	115	104	1730
Female	Observed	301	285	340	333	199	113	91	1662
	Expected	311	297	302	286	255	107	97	1655
Totals		632	617	613	579	521	222	201	3385
Type of school attended[b]									
Government	Observed	521	454	470	434	447	148	126	2600
	Expected	509	487	465	435	388	137	128	2549
Non-Government	Observed	113	165	143	145	73	73	75	787
	Expected	125	132	148	144	132	84	73	838
Totals		634	619	613	579	520	221	201	3387

Note. – The expected frequencies are derived from tables to be published by the Department of Education, Queensland (Department of Education, 1975). The observed frequencies are weighted frequencies.

a $\chi^2 = 51.71$; df = 6; $p < 0.001$

b $\chi^2 = 50.60$; df = 6; $p < 0.001$

TABLE 3

Use of Alcohol Other Than on Religious Occasions

Ever Used	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
More than once	40.2	59.3	58.3	65.6	83.2	84.2	90.5	64.5
Only once to taste	32.1	24.4	26.5	24.1	11.7	10.5	6.9	21.8
Never	27.7	16.3	15.2	10.4	5.1	5.3	2.7	13.8
Sample N	271	246	230	212	273	210	262	1704
Females[b]								
More than once	25.3	42.9	48.2	64.0	69.8	83.4	82.4	53.2
Only once to taste	39.8	37.1	37.0	25.2	21.3	12.4	12.0	30.2
Never	34.9	20.0	14.8	10.8	8.9	4.1	5.6	16.6
Sample N	249	210	284	286	169	217	217	1632
Total[c]								
More than once	33.0	51.6	52.7	64.7	78.1	83.8	86.8	58.9
Only once to taste	35.9	30.4	32.3	24.7	15.3	11.5	9.2	26.0
Never	31.1	17.9	15.0	10.6	6.5	4.7	4.0	15.1
Sample N	521	457	514	498	443	427	479	3339

[a] $\chi^2 = 203.32$; df = 12; $p < 0.0001$.

[b] $\chi^2 = 244.85$; df = 12; $p < 0.0001$.

[c] $\chi^2 = 440.83$; df = 12; $p < 0.0001$.

TABLE 4

Opportunity for Use of Alcohol

Opportunity for Use	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I have been offered it	54.6	70.0	75.1	85.4	89.2	93.4	96.5	76.8
I have never been offered it	45.4	30.0	24.9	14.6	10.8	6.6	3.5	23.2
Sample N	522	457	515	499	445	426	479	3343

$\chi^2 = 336.91$; df = 6; $p < 0.0001$

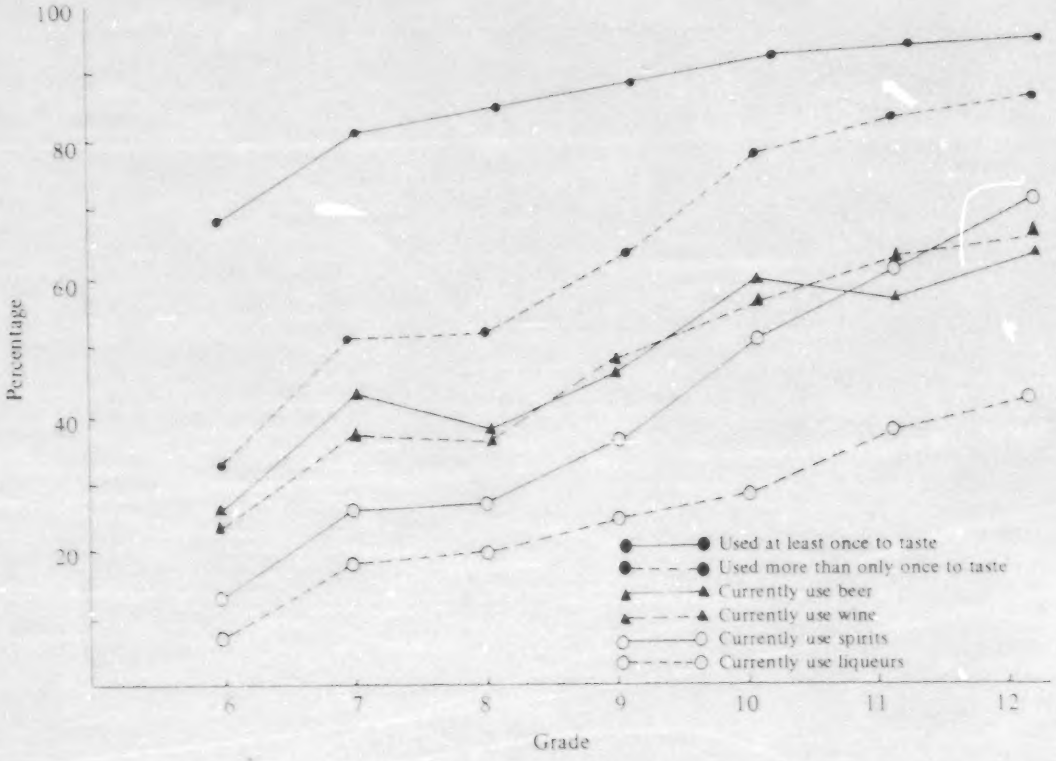

FIG. 1. Percentage of Alcohol Users, Past or Present, in Each Grade

TABLE 5

Use of Alcohol if Offered by a Good Friend

Use if Offered	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Yes, I'm sure I would	5.6	10.3	8.0	19.2	30.2	34.0	43.5	17.1
Yes, I might	20.3	32.2	38.1	39.9	47.1	49.6	42.5	36.4
I don't know	22.2	24.7	20.6	15.2	7.9	5.6	5.6	16.9
No	51.9	32.8	33.3	25.7	14.9	10.8	8.4	29.5
Sample N	522	457	514	499	444	427	478	3341

$\chi^2 = 650.46$; df = 18; $p < 0.0001$.

TABLE 6

Perceived Danger to Health of Drinking Alcohol

Perceived Danger	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Very dangerous	35.1	31.3	21.1	12.8	8.6	5.3	2.7	19.3
Fairly dangerous	36.3	35.7	37.6	37.8	28.2	20.7	15.8	32.7
Only slightly dangerous	22.8	23.3	29.3	35.9	39.5	43.4	53.9	32.7
Not dangerous at all	5.8	9.7	12.0	13.6	23.7	30.5	27.7	15.3
Sample N	325	339	351	368	337	357	412	2489

$\chi^2 = 359.00$; df = 18; $p < 0.0001$.

TABLE 7

Number of Students' Five Best Friends Using Alcohol

Number of Friends	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Five friends	11.2	27.1	20.8	29.7	41.8	47.3	54.2	30.6
Four friends	5.0	8.9	5.4	9.7	11.1	14.1	15.4	9.2
Three friends	6.1	10.0	9.8	14.4	13.6	14.4	13.8	11.5
Two friends	10.4	11.2	11.0	12.5	13.6	11.5	8.9	11.6
One friend	11.2	10.0	8.6	8.6	9.1	6.2	3.5	8.7
None	56.1	32.7	44.3	25.0	10.8	6.5	4.2	28.4
Sample N	278	269	335	360	361	356	428	2387

$\chi^2 = 423.66$; df = 30; $p < 0.0001$.

TABLE 8

Students' Anticipated Use of Alcohol in One Year's Time

Anticipated Use	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I'm sure I will be using it	5.7	10.7	9.5	17.5	30.2	37.7	48.9	17.8
I might be using it	10.2	19.9	19.8	25.6	33.2	29.7	30.9	22.4
I'm not sure	24.3	24.9	28.2	22.5	18.5	16.4	9.6	22.5
I won't be using it	59.8	44.4	42.5	34.4	18.1	16.2	10.6	37.3
Sample N	522	457	515	497	443	427	479	3340

$\chi^2 = 631.06$; df = 18; $p < 0.0001$.

TABLE 9

Age at First Use of Alcohol

Age	Grade Percentage							Total
	6	7	8	9	10	11	12	
10 years or less	90.0	75.8	55.0	47.7	33.1	38.8	33.2	
11 years	8.6	17.7	20.1	16.9	8.7	5.8	5.0	
12 years	1.4	5.1	15.7	17.7	12.9	9.3	7.1	
13 years	0.0	1.0	7.4	14.6	18.8	14.8	12.4	
14 years	0.0	0.0	0.9	2.7	18.5	16.8	16.5	
15 years	0.0	0.0	0.4	0.4	7.3	8.9	15.0	
16 years	0.0	0.0	0.0	0.0	0.7	4.1	9.4	
17 years	0.0	0.0	0.0	0.0	0.0	1.0	1.2	
18 years or older	0.0	0.4	0.4	0.0	0.0	0.3	0.3	
Sample N	140	198	229	260	287	290	340	1744

TABLE 10

Situation in Which Drinkers Had Their First Drink

Situation	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
At home	79.5	70.4	67.1	70.1	60.8	69.2	67.0	68.3
At a relative's home	4.6	5.6	1.6	5.1	7.0	5.5	4.0	4.9
At a party	7.9	12.0	19.3	14.3	17.3	11.9	16.2	14.7
At a friend's home	1.3	1.4	3.2	3.7	4.3	3.0	5.1	3.2
In a car	2.0	2.3	1.2	2.7	1.2	0.9	0.5	1.7
At a hotel	2.0	3.7	2.0	1.7	2.1	4.0	2.1	2.4
Elsewhere	2.6	4.6	5.6	2.4	7.3	5.5	5.1	4.9
Sample N	151	216	249	294	329	329	376	1944

$\chi^2 = 62.23$; df = 36; $p < 0.01$.

TABLE 11

Social Context of First Drink

Social Context	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Parents	85.9	75.3	69.2	69.9	62.7	70.1	67.9	70.6
Other relatives	3.8	10.0	7.5	7.8	10.5	7.9	7.1	8.2
Friends of my own age	4.5	6.8	11.5	12.5	16.0	14.2	17.6	11.9
Friends older than I was	4.5	5.0	10.3	7.8	8.7	6.9	6.3	7.4
Alone	1.3	2.7	1.6	2.0	2.1	0.9	1.1	1.8
Sample N	156	219	253	296	332	331	381	1968

$\chi^2 = 57.50$; df = 24; $p = 0.0001$.

TABLE 12

Current Use of Any Alcohol

Current Use of Any Alcohol	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	39.0	56.9	54.1	63.7	79.9	78.8	85.9	61.6
No	61.0	43.1	45.9	36.3	20.1	21.2	14.1	38.4
Sample N	272	246	231	212	274	208	262	1705
Females[b]								
Yes	22.8	37.1	44.4	57.8	65.3	79.3	80.1	48.8
No	77.2	62.9	55.6	42.2	34.7	20.7	19.9	51.2
Sample N	250	210	284	287	170	217	217	1635
Total[c]								
Yes	31.2	47.7	48.7	60.3	74.4	79.1	83.3	55.3
No	68.8	52.3	51.3	39.7	25.6	20.9	16.7	44.7
Sample N	523	457	515	499	445	427	479	3345

[a] $\chi^2 = 167.14$; df = 6; $p < 0.0001$.

[b] $\chi^2 = 209.24$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 370.03$; df = 6; $p < 0.0001$.

TABLE 13

Current Drinking of Beer, Ale, Stout

Current Use of Beer, Ale or Stout	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	35.1	54.9	47.8	59.0	70.6	71.8	78.5	56.1
No	64.9	45.1	52.2	41.0	29.4	28.2	21.5	43.9
Sample N	271	246	230	212	272	206	262	1699
Females[b]								
Yes	17.6	30.0	32.4	39.9	46.5	45.2	48.6	34.3
No	82.4	70.0	67.6	60.1	53.5	54.8	51.4	65.7
Sample N	250	210	284	286	170	217	217	1634
Total[c]								
Yes	26.6	43.3	39.3	48.0	61.2	58.3	65.1	45.3
No	73.4	56.7	60.7	52.0	38.8	41.7	34.9	54.7
Sample N	522	457	514	498	443	423	479	3336

[a] $\chi^2 = 127.36$; df = 6; $p < 0.0001$.

[b] $\chi^2 = 71.82$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 198.88$; df = 6; $p < 0.0001$.

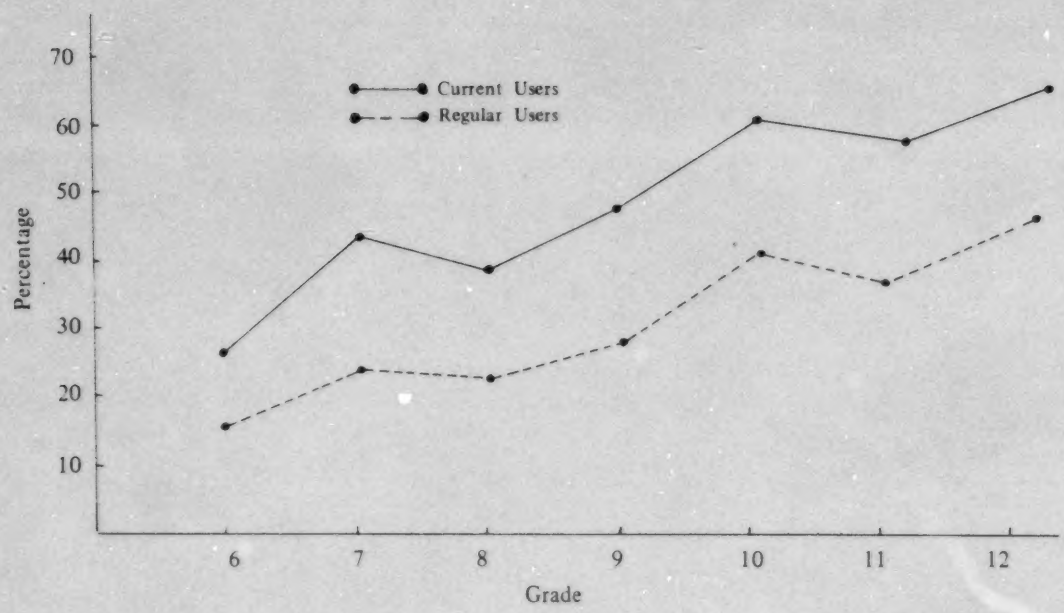

FIG. 2. Percentage of Beer Drinkers at Each Grade Level

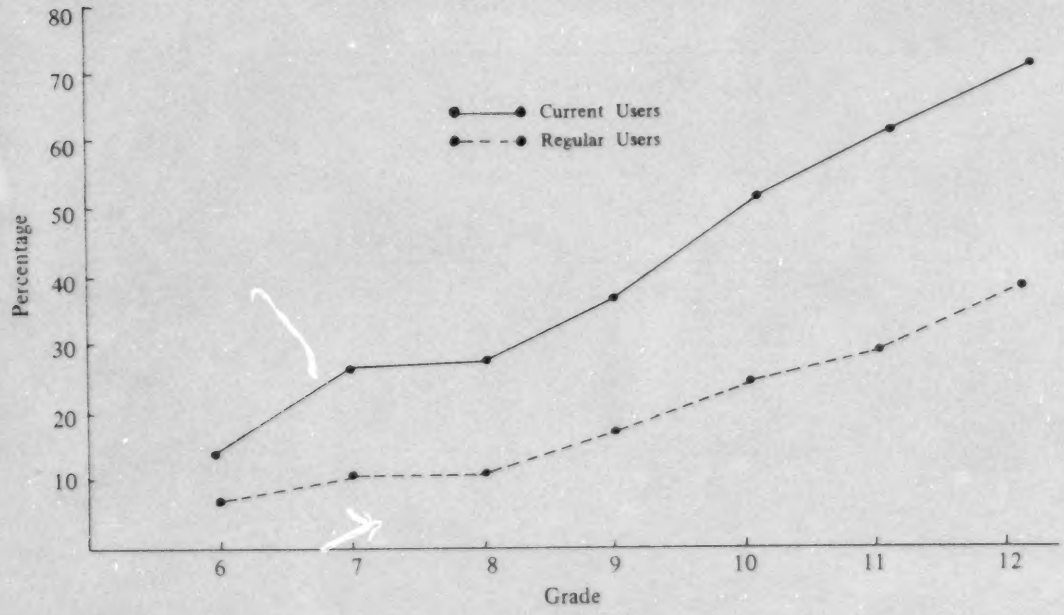

FIG. 3. Percentage of Spirit Drinkers at Each Grade Level

TABLE 14

Current Drinking of Spirits

Current Use of Spirits	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	18.0	34.6	31.3	38.7	54.2	61.4	73.2	39.3
No	82.0	65.4	68.7	61.3	45.8	38.6	26.8	60.7
Sample N	272	246	230	212	273	208	262	1703
Females[b]								
Yes	9.6	16.7	24.6	35.7	48.5	61.8	69.0	30.6
No	90.4	83.3	75.4	64.3	51.5	38.2	31.0	69.4
Sample N	250	210	284	286	169	217	217	1633
Total[c]								
Yes	14.0	26.3	27.6	36.9	51.9	61.6	71.3	35.0
No	86.0	73.7	72.4	63.1	48.1	38.4	28.7	65.0
Sample N	523	457	514	498	443	425	479	3339

[a] $\chi^2 = 176.90$; df = 6; $p < 0.0001$.

[b] $\chi^2 = 242.27$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 409.04$; df = 6; $p < 0.0001$.

TABLE 15

Current Drinking of Wine

Current Use of Wine	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	28.7	45.5	38.5	48.1	64.2	61.8	67.4	47.5
No	71.3	54.5	61.5	51.9	35.8	38.2	32.6	52.5
Sample N	272	246	231	212	274	208	262	1705
Females[b]								
Yes	19.6	28.6	36.7	47.4	48.8	69.6	69.9	39.9
No	80.4	71.4	63.3	52.6	51.2	30.4	30.1	60.1
Sample N	250	210	283	287	170	217	217	1634
Total[c]								
Yes	24.3	37.6	37.5	47.7	58.4	65.9	68.6	43.8
No	75.7	62.4	62.5	52.3	41.6	34.1	31.4	56.2
Sample N	523	457	514	499	445	425	479	3342

[a] $\chi^2 = 118.06$; df = 6; $p < 0.0001$.

[b] $\chi^2 = 158.04$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 259.15$; df = 6; $p < 0.0001$.

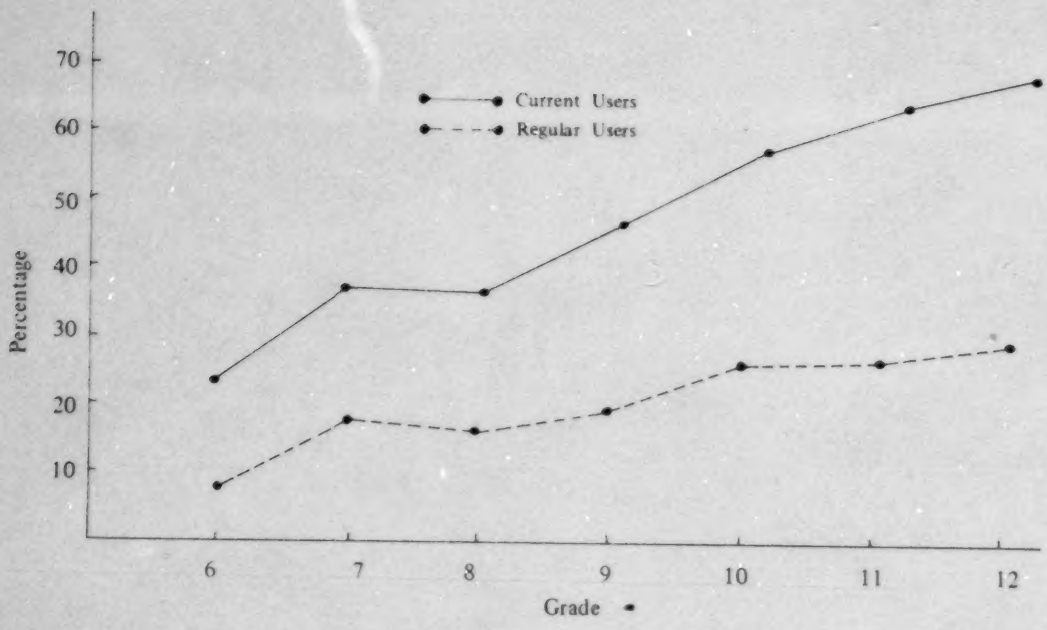

FIG. 4. Percentage of Wine Drinkers at Each Grade Level

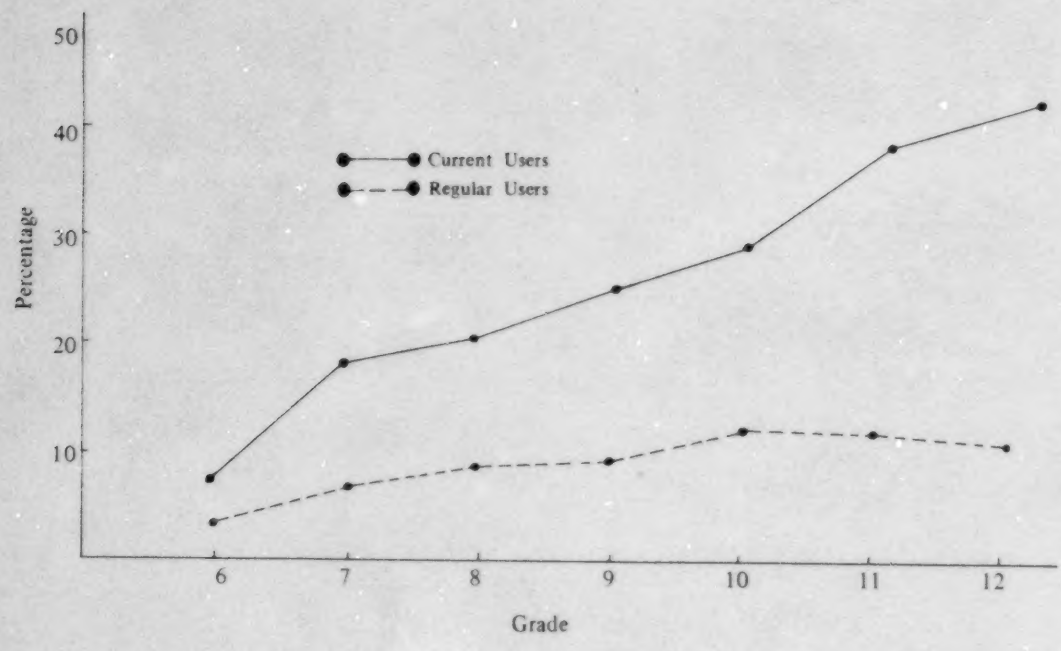

FIG. 5. Percentage of Liqueur Drinkers at Each Grade Level

TABLE 16

Current Drinking of Liqueurs

Current Use of Liqueurs	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	8.8	24.8	22.5	25.6	33.1	35.6	42.5	24.9
No	91.2	75.2	77.5	74.4	66.9	64.4	57.5	75.1
Sample N	272	246	231	211	272	208	262	1702
Females[b]								
Yes	6.0	11.4	18.3	25.4	23.5	41.9	43.5	20.0
No	94.0	88.6	81.7	74.6	76.5	58.1	56.5	80.0
Sample N	250	210	284	287	170	217	217	1635
Total[c]								
Yes	7.5	18.6	20.2	25.5	29.6	39.0	43.1	22.5
No	92.5	81.4	79.8	74.5	70.4	61.0	56.9	77.5
Sample N	523	457	515	498	443	427	479	3342

[a] $\chi^2 = 82.32$; df = 6; $p < 0.0001$.

[b] $\chi^2 = 123.57$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 189.93$; df = 6; $p < 0.0001$.

TABLE 17

Beer Drinkers' Current Frequency of Beer Consumption

Current Frequency	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Once a day or more	10.1	9.6	7.4	3.3	4.4	4.0	4.5	6.2
About 3 or 4 times a week	16.5	7.1	6.4	9.2	11.4	4.5	10.3	9.4
About once or twice a week	10.1	18.2	20.8	22.6	21.0	25.1	29.3	20.6
About 2 or 3 times a month	23.7	22.7	24.8	24.7	31.0	30.0	27.3	26.2
Once a month or less	39.6	42.4	40.6	40.2	32.1	36.4	28.6	37.6
Sample N	139	198	202	239	271	246	312	1607

$\chi^2 = 64.34$; df = 24; p < 0.0001.

TABLE 18

Spirit Drinkers' Current Frequency of Spirits Consumption

Current Frequency	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Once a day or more	5.5	7.5	0.7	3.8	1.7	1.5	1.2	2.9
About 3 or 4 times a week	11.0	4.2	4.9	5.4	2.6	2.3	2.3	4.2
About once or twice a week	12.3	7.5	7.0	13.6	13.9	10.7	18.2	12.0
About 2 or 3 times a month	21.9	20.0	24.6	23.9	30.0	33.6	32.3	26.9
Once a month or less	49.3	60.8	62.7	53.3	51.7	51.9	46.0	54.0
Sample N	73	120	142	184	230	262	340	1351

$\chi^2 = 62.77$; df = 24; p < 0.0001.

TABLE 19

Wine Drinkers' Current Frequency of Wine Consumption

	Current Frequency					Sample N
	Once a day or more	About 3 or 4 times a week	About once or twice a week	About 2 or 3 times a a month	Once a month or less	
Weighted Total Percentage	3.2	4.5	10.3	24.3	57.7	1600

Note. – Grade differences are not significant.

(χ^2 = 29.72; df = 24; p > 0.01)

TABLE 20

Liqueur Drinkers' Current Frequency of Liqueur Consumption

Current Frequency	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Once a day or more	5.1	10.6	4.8	1.6	1.5	1.8	0.0	3.5
About 3 or 4 times a week	5.1	4.7	7.7	2.4	2.3	1.2	1.0	3.4
About once or twice a week	17.9	7.1	12.5	5.5	9.9	7.8	5.6	8.8
About 2 or 3 times a month	15.4	14.1	18.3	26.0	27.5	19.9	18.0	21.0
Once a month or less	56.4	63.5	56.7	64.6	58.8	69.3	75.2	63.2
Sample N	39	85	104	127	131	165	207	858

χ^2 = 58.36; df = 24; p = 0.0001.

TABLE 21

Amount of Beer, Ale or Stout Currently Consumed Each Time by Beer Drinkers

Amount Consumed Each Time	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
More than two bottles (each 26 fl. oz.)	3.8	3.2	4.1	8.2	15.6	14.7	15.7	9.0
About two bottles	0.0	4.7	4.7	5.6	15.6	15.5	16.4	8.6
About one bottle	6.2	13.2	13.0	16.4	14.1	16.3	20.3	14.1
Half bottle or less	90.0	78.9	78.2	69.8	54.8	53.5	47.5	68.3
Sample N	130	190	193	232	270	244	305	1564

χ^2 = 156.35; df = 18; p <0.0001.

TABLE 22

Amount of Spirits Currently Consumed Each Time by Spirits Drinkers

Amount Consumed Each Time	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
More than two drinks	6.1	9.5	8.8	21.5	30.0	34.5	33.2	21.5
About two drinks	9.8	8.7	17.0	17.8	20.3	27.7	30.9	19.0
About one drink	24.4	20.6	30.6	22.5	21.5	22.7	21.1	23.2
Half a drink or less	59.8	61.1	43.5	38.2	28.3	15.2	14.8	36.3
Sample N	82	126	147	191	237	263	338	1384

$\chi^2 = 186.21$; df = 18; $p < 0.0001$.

TABLE 23

Amount of Wine Currently Consumed Each Time by Wine Drinkers

Amount Consumed Each Time	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
More than two glasses	6.5	9.4	10.3	9.0	17.8	16.0	15.9	12.2
Two glasses	11.3	9.4	13.9	23.7	28.4	31.0	28.7	20.9
One glass	25.8	25.3	32.0	29.0	29.2	33.1	33.8	29.5
Half glass or less	56.5	55.9	43.8	38.4	24.6	19.9	21.6	37.5
Sample N	124	170	194	245	264	287	329	1613

$\chi^2 = 143.79$; df = 18; $p < 0.0001$.

TABLE 24

Amount of Liqueur Currently Consumed Each Time by Liqueur Drinkers

Amount Consumed Each Time	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
More than two drinks	4.7	7.5	5.9	8.6	11.9	7.9	9.4	8.4
About two drinks	25.6	10.8	12.9	13.3	23.1	25.5	18.7	17.6
About one drink	16.3	29.0	35.6	34.4	34.3	42.4	49.5	35.1
Half a drink or less	53.5	52.7	45.5	43.7	30.6	24.2	22.1	38.9
Sample N	43	93	101	128	134	165	202	866

$\chi^2 = 56.37$; df = 18; $p < 0.0001$.

TABLE 25

Drinkers' Appreciation of the Taste of the Drinks they Usually Have

Appreciation of Taste	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I like the taste very much	46.8	51.5	48.7	56.2	60.1	65.2	70.4	56.1
I like the taste a little	48.0	43.7	42.9	39.3	36.7	31.6	26.8	39.1
I don't like the taste	5.3	4.8	8.4	4.5	3.3	3.2	2.7	4.7
Sample N	171	229	261	308	338	348	407	2062

$\chi^2 = 47.34$; df = 12; $p < 0.0001$.

TABLE 26

Drinkers' Present Frequency of Drinking Compared with Six Months Ago

Present Frequency Compared with Six Months Ago	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
More often now	21.2	21.3	17.4	26.4	31.5	29.3	30.5	25.5
About the same	47.0	52.0	52.2	49.3	42.7	51.5	52.9	49.1
Less often now	31.8	26.7	30.4	24.3	25.8	19.2	16.6	25.4
Sample N	151	202	224	276	314	335	398	1900

$\chi^2 = 36.46$; df = 12; $p < 0.001$.

TABLE 27

Proportion of Drinking Done with Parents or Other Relatives

Proportion	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
All of it	49.4	39.4	39.7	29.3	17.2	14.0	7.9	28.7
Most of it	24.1	31.7	23.8	28.9	29.1	28.3	24.3	27.6
About half of it	9.6	8.3	11.5	11.5	12.8	21.6	26.1	13.3
Very little of it	10.8	15.6	16.7	21.4	29.7	24.5	33.7	21.8
None of it	6.0	5.0	8.3	8.9	11.3	11.7	7.9	8.6
Sample N	166	218	252	304	337	342	402	2021

$\chi^2 = 209.46$; df = 24; $p < 0.0001$.

TABLE 28

Proportion of Drinking Done at Home

Proportion	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
All of it	39.8	27.1	28.7	22.3	10.7	5.5	3.5	20.2
Most of it	31.3	35.3	30.7	30.2	27.2	28.5	21.4	29.6
About half of it	10.8	11.5	12.4	15.4	16.7	21.2	22.9	15.3
Very little of it	10.2	19.7	18.7	22.3	32.5	32.3	41.5	24.9
None of it	7.8	6.4	9.6	9.8	12.8	12.5	10.7	10.0
Sample N	166	218	251	305	335	344	402	2021

$\chi^2 = 208.91$; df = 24; $p < 0.0001$.

TABLE 29

Proportion of Drinking Done with Friends

Proportion	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
All of it	1.2	6.0	4.8	5.3	11.7	9.9	8.9	7.2
Most of it	6.0	9.2	13.2	15.9	25.7	24.8	33.7	17.9
About half of it	8.4	7.8	9.2	15.2	15.6	23.3	26.7	14.3
Very little of it	22.9	31.3	28.4	27.8	28.7	28.3	22.5	27.7
None of it	61.4	45.6	44.4	34.8	18.3	13.7	8.2	33.0
Sample N	166	217	250	302	334	342	405	2016

$\chi^2 = 306.54$; df = 24; $p < 0.0001$.

TABLE 30

Proportion of Drinking Done at Friends' Homes

Proportion	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
All of it	1.8	3.2	0.8	1.0	1.2	0.6	0.7	1.4
Most of it	3.0	3.2	3.6	5.6	6.6	10.8	10.9	5.8
About half of it	4.2	8.2	8.4	10.8	14.0	16.3	21.1	11.5
Very little of it	28.5	33.8	32.0	38.4	42.1	48.1	51.5	38.5
None of it	62.4	51.6	55.2	44.3	36.1	24.2	15.7	42.9
Sample N	165	219	250	305	335	342	402	2018

$\chi^2 = 172.65$; df = 24; $p < 0.0001$.

TABLE 31

Proportion of Drinking Done at Friends' Parties

Proportion	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
All of it	0.6	3.7	2.8	3.3	3.3	1.8	1.5	2.7
Most of it	3.0	5.5	8.8	11.1	13.1	13.7	20.6	10.6
About half of it	7.9	13.8	11.2	13.4	23.6	28.4	30.6	17.6
Very little of it	24.8	27.2	30.7	31.1	32.5	36.0	35.3	30.9
None of it	63.6	49.8	46.6	41.0	27.5	20.2	11.9	38.2
Sample N	165	217	251	305	335	342	402	2017

$\chi^2 = 219.06$; df = 24; $p < 0.0001$.

TABLE 32

Proportion of Drinking Done at Public Functions

Proportion	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
All of it	0.6	2.3	0.4	0.7	0.3	0.9	0.2	0.8
Most of it	1.2	4.1	4.4	7.2	9.9	8.2	7.7	6.4
About half of it	3.7	5.0	7.9	9.9	11.7	10.2	17.2	9.2
Very little of it	16.0	22.4	25.4	28.3	33.4	38.9	45.4	29.2
None of it	78.5	66.2	61.9	53.9	44.6	41.8	29.4	54.4
Sample N	163	219	252	304	332	342	400	2012

$\chi^2 = 164.62$; df = 24; $p < 0.0001$.

TABLE 33

Proportion of Drinking Done at Hotels

Proportion	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
All of it	0.6	1.4	2.0	0.3	0.3	0.0	0.5	0.8
Most of it	0.0	2.3	2.8	2.6	.45	4.1	10.2	3.5
About half of it	4.8	2.8	1.6	2.3	6.0	10.3	20.6	5.7
Very little of it	12.1	18.5	13.9	23.4	21.8	33.1	35.5	21.6
None of it	82.4	75.0	79.8	71.3	67.5	52.5	33.3	68.4
Sample N	165	216	252	303	335	340	402	2013

$\chi^2 = 230.58$; df = 24; $p < 0.0001$.

TABLE 34

Proportion of Drinking Done in the Open Air

Proportion	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
All of it	0.6	3.2	0.4	1.0	0.9	0.9	0.2	1.1
Most of it	3.6	2.3	3.2	7.2	8.4	5.3	4.7	5.3
About half of it	2.4	5.5	7.1	9.2	14.6	12.6	18.1	9.8
Very little of it	24.7	31.2	25.8	28.9	31.6	40.8	45.4	31.5
None of it	68.7	57.8	63.5	53.6	44.5	40.5	31.5	52.3
Sample N	166	218	252	304	335	340	402	2017

$\chi^2 = 139.18$; df = 24; $p < 0.0001$.

TABLE 35

Proportion of Drinking Done When Alone

Proportion	Grade Percentages							Weighted Total Percentage
	6	7	8	9	10	11	12	
All of it	1.8	2.8	0.4	1.3	0.9	0.0	0.2	1.1
Most of it	2.4	3.2	1.6	2.0	1.2	0.6	0.5	1.7
About half of it	3.0	2.3	4.4	2.3	2.1	2.3	1.0	2.6
Very little of it	15.9	21.1	20.3	27.8	34.7	32.7	39.1	27.2
None of it	76.8	70.6	73.3	66.6	61.1	64.4	59.2	67.3
Sample N	164	218	251	299	334	342	405	2013

$\chi^2 = 72.91$; df = 24; $p < 0.0001$.

TABLE 36

Proportion of Drinking Done in Cars

Proportion	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
All of it	1.2	2.3	0.0	1.0	0.6	0.3	0.2	0.8
Most of it	0.6	2.3	4.0	4.3	5.4	3.2	1.5	3.4
About half of it	0.0	2.3	4.8	4.9	7.8	3.8	6.2	4.6
Very little of it	15.3	17.8	15.1	22.0	28.7	28.7	36.3	22.9
None of it	82.8	75.3	76.1	67.9	57.5	63.9	55.7	68.3
Sample N	163	219	251	305	334	340	402	2014

$\chi^2 = 107.02$; df = 24; $p < 0.0001$.

TABLE 37

Drinkers' Usual Source of Alcohol

Usual Source	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
From friends	3.7	10.9	13.6	20.2	27.9	28.4	24.8	18.8
From my parents with their permission	79.1	67.8	67.6	58.6	45.2	43.0	33.0	57.0
From my parents without their permission	6.1	8.5	5.2	5.0	4.2	3.5	0.8	5.0
From my brothers and sisters	1.2	6.2	4.8	3.0	5.2	4.7	1.3	4.0
I buy the drink myself	0.6	1.9	2.8	5.6	13.3	13.5	34.3	9.0
Other	9.2	4.7	6.0	7.6	4.2	7.0	5.5	6.1
Sample N	163	211	250	302	330	342	400	1998

$\chi^2 = 342.43$; df = 30; $p < 0.0001$.

TABLE 38

Drinkers' Opinion of Their Parents' Awareness of the Fact of Their Drinking

Drinkers' Opinion	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
My parents are aware I drink	93.5	90.6	85.1	88.1	83.7	86.5	93.7	88.1
My parents are not aware I drink	6.5	9.4	14.9	11.9	16.3	13.5	6.3	11.9
Sample N	153	191	222	253	283	296	367	1765

$\chi^2 = 19.80$; df = 6; $p < 0.01$.

TABLE 39

Drinkers' Opinion of Their Parents' Awareness of the Amount of Their Drinking

Drinkers' Opinion	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I drink more than they believe	11.6	16.7	16.1	23.0	37.1	31.9	34.6	24.3
They know about how much I drink	75.5	77.0	70.8	69.9	57.3	65.2	60.3	68.0
I drink less than they believe	12.9	6.3	13.1	7.1	5.6	2.9	5.1	7.7
Sample N	147	174	199	226	248	273	331	1598

$\chi^2 = 86.88$; df = 12; $p < 0.0001$.

TABLE 40

Drinkers' Attempts at Under-Age Hotel Drinking

Under-Age Hotel Drinking Attempted	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Yes	10.8	17.8	9.6	22.1	29.9	43.9	62.5	25.9
No	89.2	82.2	90.4	77.9	70.1	56.1	37.5	74.1
Sample N	157	208	239	299	324	344	405	1976

$\chi^2 = 225.63$; df = 6; $p < 0.0001$.

TABLE 41

Refusal of Service to Drinkers who have Tried to Drink in a Hotel while Under-Age

Refusal of Service	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Yes	27.8	48.5	39.1	29.0	25.0	14.7	22.3	26.5
No	72.2	51.5	60.9	71.0	75.0	85.3	77.7	73.5
Sample N	18	33	23	62	96	150	250	632

$\chi^2 = 23.25$; df = 6; $p < 0.001$

TABLE 42

Drinkers' Experience of Being Drunk

Experience of being Drunk	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Yes	27.3	28.8	33.3	35.0	46.8	43.4	56.4	38.3
No	72.7	71.2	66.7	65.0	53.2	56.6	43.6	61.7
Sample N	154	215	240	300	333	346	400	1988

$\chi^2 = 62.32$; df = 6; $p < 0.0001$.

TABLE 43

Drinkers' Experience of Behaving Atypically when Drinking

Experience of Behaving Atypically	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Yes	20.0	26.2	18.6	24.7	40.4	35.5	43.4	29.6
No	80.0	73.8	81.4	75.3	59.6	64.5	56.6	70.4
Sample N	155	206	237	292	322	344	400	1956

$\chi^2 = 69.28$; df = 6; $p < 0.0001$.

TABLE 44

Drinkers' Experience of Being Ill Due to Alcohol

Experience of Being Ill Due to Alcohol	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Yes	22.2	21.7	24.5	26.3	29.8	31.1	46.6	28.0
No	77.8	78.3	75.5	73.7	70.2	68.9	53.4	72.0
Sample N	153	207	233	297	325	344	400	1809

$\chi^2 = 41.01$; df = 6; $p < 0.0001$.

TABLE 45

Drinkers' Experience of Losing their Memory Due to Alcohol

Experience of Losing Memory Due to Alcohol	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Yes	8.9	16.2	11.5	17.2	21.6	17.9	22.2	16.8
No	91.1	83.8	88.5	82.8	78.4	82.1	77.8	83.2
Sample N	146	204	234	285	315	340	395	1919

$\chi^2 = 23.10$; df = 6; $p < 0.001$.

TABLE 46

Drinkers' Experience of being in Trouble with the Law Because of Drinking

Experience of being in Trouble with the Law	Weighted Total Percentage
Yes	3.5
No	96.5
Sample N	1902

Note. – Grade differences are not significant.
($\chi^2 = 7.27$; df = 6; $p > 0.01$)

TABLE 47

Drinkers' Reasons for Using Alcohol

Main Reason for Using Alcohol	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I like the taste	61.7	57.5	57.1	56.1	46.3	48.5	39.2	52.2
So as not to be the "odd one out" in a group	6.5	8.1	6.0	8.3	4.5	5.1	4.9	6.2
To help me relax	2.8	4.4	4.8	4.3	4.9	4.4	9.8	5.0
To give myself confidence	2.8	0.0	0.6	0.9	0.7	3.8	1.9	1.3
To help me mix more easily with others	3.7	2.5	2.4	4.8	11.9	6.5	13.6	6.7
To let me forget my worries	1.9	1.9	1.2	3.0	4.1	2.1	3.8	2.8
It makes me feel happy	4.7	7.5	4.2	7.4	11.6	16.7	12.8	9.2
Some other reason	15.9	18.1	23.8	15.2	16.0	12.3	13.9	16.6
Sample N	107	160	168	230	268	292	367	1592

$\chi^2 = 117.88$; df = 42; $p < 0.0001$.

TABLE 48

Non-Drinkers' Reasons for Not Using Alcohol

Main Reason for Not Using Alcohol	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I don't like the taste	30.3	30.2	38.8	38.1	29.3	43.5	21.4	33.3
Drinking makes me feel ill	6.3	3.8	6.6	2.1	0.0	2.2	2.4	4.4
Drinking makes you lose control of yourself	4.0	4.7	4.1	5.2	6.9	2.2	2.4	4.5
My parents don't approve of drinkers	16.0	8.5	14.0	13.4	5.2	4.3	0.0	11.9
It's against the law to drink at my age	10.3	5.7	4.1	3.1	3.4	2.2	4.8	6.0
Drinking is against my moral principles	2.9	7.5	9.1	20.6	27.6	30.4	40.5	12.0
Drinking is bad for your health	22.9	27.4	14.0	10.3	15.5	4.3	11.9	18.5
Some other reason	7.4	12.3	9.1	7.2	12.1	10.9	16.7	9.5
Sample N	175	106	121	97	58	46	43	646

$\chi^2 = 114.91$; df = 42; $p < 0.0001$.

TABLE 49

Ex-Drinkers' Reasons for Giving up Alcohol

Main Reason for Giving Up Alcohol	Weighted Total Percentage
I felt that drinking was morally wrong	19.3
Drink was having a bad effect on my health	6.5
I had some bad experiences with drink	7.2
I got into trouble with the police because of drink	0.0
I did some things when drunk that I should not have done	0.0
My parents wanted me to stop drinking	1.6
I was drinking too much	4.2
Some other reason	61.2
Sample N	34

Note. – Grade differences are not significant.
(χ^2 = 28.50; df = 30; p > 0.01)

TABLE 50

Use of Cannabis

Ever Used	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	3.6	3.3	3.0	3.3	9.1	12.4	15.7	5.8
No	96.4	96.7	97.0	96.7	90.0	87.6	84.3	94.2
Sample N	253	243	230	210	274	210	262	1682
Females[b]								
Yes	0.8	1.0	2.3	4.2	1.8	9.7	19.4	3.6
No	99.2	99.0	97.7	95.8	98.2	90.3	80.6	96.4
Sample N	241	209	263	287	170	215	217	1602
Total[c]								
Yes	2.2	2.2	2.6	3.8	6.3	11.0	17.6	4.7
No	97.8	97.8	97.4	96.2	93.7	89.0	82.4	95.3
Sample N	496	453	493	497	445	426	478	3288

[a] $\chi^2 = 47.92$; df = 6; $p < 0.0001$.

[b] $\chi^2 = 93.68$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 119.36$; df = 6; $p < 0.0001$.

TABLE 51

Opportunity for Use of Cannabis

Opportunity for Use	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I have been offered it	3.0	2.4	4.3	7.1	13.0	18.2	25.7	7.8
I have never been offered it	97.0	97.6	95.7	92.9	87.0	81.8	74.3	92.2
Sample N	497	456	494	496	446	424	478	3291

$\chi^2 = 197.24$; df = 6; $p < 0.0001$.

TABLE 52

Use of Cannabis if Offered by a Good Friend

Use if Offered	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Yes I am sure I would	0.2	1.1	0.8	2.0	3.6	6.3	7.3	2.2
Yes I might	3.8	4.2	4.8	5.4	9.9	13.6	18.4	6.8
I don't know	16.3	7.9	9.5	11.4	12.3	10.1	9.4	11.2
No	79.7	86.8	84.8	81.1	74.2	70.0	64.8	79.8
Sample N	498	456	495	498	446	427	477	3297

$\chi^2 = 186.02$; df = 18; $p < 0.0001$.

TABLE 53

Perceived Danger to Health of Using Cannabis

Perceived Danger	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Very dangerous	71.9	84.1	72.8	56.6	46.5	30.3	24.9	62.1
Fairly dangerous	22.7	12.5	19.6	34.0	28.4	34.3	31.2	24.3
Only slightly dangerous	3.6	1.2	5.5	7.5	18.5	25.6	29.4	9.6
Not dangerous at all	1.8	2.1	2.1	1.8	6.6	9.8	14.4	4.0
Sample N	279	327	327	332	271	296	333	2165

$\chi^2 = 422.07$; df = 18; $p < 0.0001$

TABLE 54

Number of Student's Five Best Friends using Cannabis

Number of Friends	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Five friends	1.2	2.7	2.6	0.7	1.3	4.5	4.1	2.1
Four friends	1.2	0.0	0.5	0.5	1.3	1.3	2.6	0.9
Three friends	1.2	0.9	1.3	1.7	3.4	4.5	4.1	2.1
Two friends	1.2	0.9	0.8	1.7	3.2	2.9	7.9	2.1
One friend	0.6	0.9	2.4	3.2	4.5	9.3	8.2	3.3
None	94.6	94.6	92.4	92.0	86.2	77.5	73.1	89.6
Sample N	336	333	382	402	378	379	416	2626

$\chi^2 = 155.74$; df = 30; $p < 0.0001$.

TABLE 55

Students' Anticipated Use of Cannabis in One Year's Time

Anticipated Use	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I'm sure I will be using it	0.2	0.7	1.0	1.0	1.8	3.0	3.8	1.2
I might be using it	1.6	2.6	2.4	3.8	5.2	8.0	8.8	3.7
I'm not sure	15.7	9.0	10.7	12.9	12.3	15.7	13.8	12.4
I won't be using it	82.5	87.7	85.9	82.3	80.7	73.3	73.7	82.6
Sample N	496	456	496	496	446	427	479	3296

$\chi^2 = 85.94$; df = 18; $p < 0.0001$.

TABLE 56

Age at First Use of Cannabis

Age	Grade Percentage							Total
	6	7	8	9	10	11	12	
10 years or less	50.0	50.0	9.1	0.0	0.0	2.4	0.0	
11 years	20.0	25.0	27.3	7.1	0.0	4.9	1.3	
12 years	30.0	0.0	45.5	14.3	8.0	0.0	0.0	
13 years	0.0	0.0	18.2	21.4	20.0	7.3	3.9	
14 years	0.0	0.0	0.0	50.0	32.0	14.6	6.6	
15 years	0.0	0.0	0.0	0.0	28.0	36.6	18.4	
16 years	0.0	0.0	0.0	0.0	12.0	31.7	48.7	
17 years	0.0	-0.0	0.0	0.0	0.0	2.4	21.1	
18 years or older	0.0	25.0	0.0	7.1	0.0	0.0	0.0	
Sample N	10	4	11	14	25	40	76	180

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TABLE 57

Current Use of Cannabis

Current Use of Cannabis	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	2.0	2.0	2.6	2.8	5.8	7.7	10.3	3.8
No	98.0	98.0	97.4	97.2	94.2	92.3	89.7	96.2
Sample N	255	246	231	211	275	210	262	1690
Females[b]								
Yes	0.8	0.0	0.8	1.7	1.2	6.0	12.5	1.9
No	99.2	100.0	99.2	98.3	98.8	94.0	87.5	98.1
Sample N	241	210	265	287	170	217	217	1607
Total[c]								
Yes	1.4	1.1	1.6	2.2	4.0	6.8	11.5	2.9
No	98.6	98.9	98.4	97.8	96.0	93.2	88.5	97.1
Sample N	497	457	496	498	446	427	479	3300

[a] $\chi^2 = 27.80$; df = 6; p = 0.0001

[b] $\chi^2 = 74.4$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 83.01$; df = 6; $p < 0.0001$.

TABLE 58

Cannabis Users' Current Frequency of Cannabis Use

	Current Frequency					Sample N
	Once a day or more	About 3 or 4 times a week	About once or twice a week	About 2 or 3 times a month	Once a month or less	
Weighted Total Percentage	8.2	12.5	11.9	16.6	50.8	133

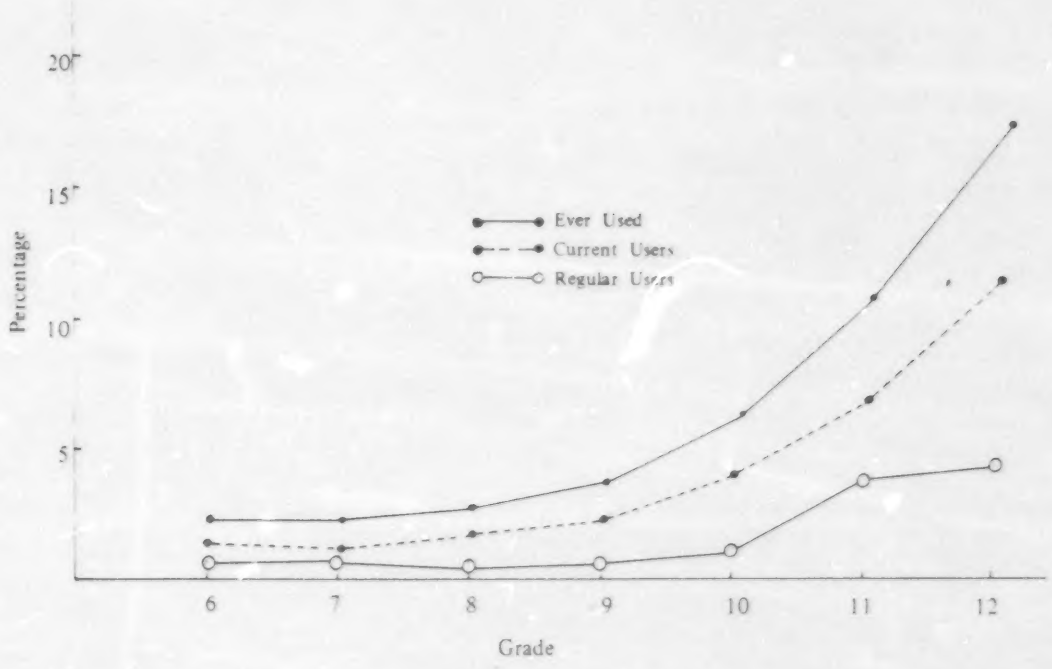

FIG. 6. **Percentage of Cannabis Users at Each Grade Level**

TABLE 59

Number of Cannabis Cigarettes Smoked Each Time by Current Users

	Number of Cannabis Cigarettes Smoked Each Time				Sample N
	Four or more	Three	Two	One	
Weighted Total Percentage	8.8	14.4	25.4	51.4	136

TABLE 60

Users' Present Frequency of Cannabis Use Compared with Six Months Ago

	Present Frequency Compared with Six Months Ago			Sample N
	More Often Now	About the Same	Less Often Now	
Weighted Total Percentage	28.2	35.9	35.9	131

TABLE 61

Users' Usual Source of Cannabis

Usual Source	Weighted Total Percentage
From friends	57.8
From my parents	4.4
From my brothers and sisters	13.2
From my own cannabis plants	5.5
From growers	4.9
From cannabis plants growing wild	4.0
From a dealer in drugs	5.0
Other	5.2
Sample N	155

TABLE 62

Cannabis Users' Opinion of Their Parents' Awareness of Their Cannabis Use

	Users' Opinion of Parents' Awareness		Sample N
	My parents are aware I use it	My parents are not aware I use it	
Weighted Total Percentage	16.0	84.0	130

TABLE 63

Use of Inhalants

	Ever Used		Sample N
	Yes	No	
Males[a] Weighted Total Percentage	8.1	91.9	16[illegible]
Females[b] Weighted Total Percentage	4.9	95.1	1605
Total[c] Weighted Total Percentage	6.5	93.5	3281

Note. - Grade differences are not significant.

[a] $\chi^2 = 4.81$; df = 6; $p > 0.01$

[b] $\chi^2 = 5.74$; df = 6; $p > 0.01$

[c] $\chi^2 = 4.27$; df = 6; $p > 0.01$

TABLE 64

Opportunity for Use of Inhalants

	Opportunity for Use		Sample N
	I have been offered it	I have never been offered it	
Weighted Total Percentage	9.2	90.8	3293

Note. - Grade differences are not significant.

($\chi^2 = 0.87$; df = 6; $p > 0.01$)

TABLE 65

Use of Inhalants if Offered by a Good Friend

Use if Offered	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Yes I am sure I would	1.0	1.3	1.2	2.4	1.1	1.6	1.5	1.4
Yes I might	7.0	5.7	7.9	7.8	10.3	12.9	10.9	8.2
I don't know	14.7	12.7	10.9	18.1	16.6	14.8	11.5	14.4
No	77.3	80.3	80.0	71.6	72.0	70.7	76.2	76.0
Sample N	497	456	496	497	446	426	479	3297

$\chi^2 = 42.57$; df = 18; $p < 0.001$.

TABLE 66

Perceived Danger to Health of Using Inhalants

Perceived Danger	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Very dangerous	63.2	69.2	57.3	46.2	45.8	36.0	38.7	54.5
Fairly dangerous	26.0	23.3	32.9	39.7	33.5	45.7	42.8	32.6
Only slightly dangerous	9.3	3.9	7.8	11.3	17.4	14.7	15.2	10.2
Not dangerous at all	1.5	3.6	2.0	2.7	3.4	3.6	3.4	2.8
Sample N	269	305	295	292	236	277	298	1972

$\chi^2 = 119.37$; df = 18; $p < 0.0001$.

TABLE 67

Number of Students' Five Best Friends using Inhalants

	Number of Friends						Sample N
	Five friends	Four friends	Three friends	Two friends	One friend	None	
Weighted Total Percentage	1.3	0.6	1.1	1.4	2.1	93.5	2322

Note Grade differences are not significant.

($\chi^2 = 35.47$; df = 30; $p > 0.01$)

TABLE 68

Students' Anticipated Use of Inhalants in One Year's Time

	Anticipated Use				Sample N
	I'm sure I will be using it	I might be using it	I'm not sure	I won't be using it	
Weighted Total Percentage	0.9	2.6	12.1	84.4	3297

Note. - Grade differences are not significant.

($\chi^2 = 6.53$; df = 18; $p > 0.01$)

TABLE 69

Age at First Use of Inhalants

Age	Grade Percentage							Total
	6	7	8	9	10	11	12	
10 years or less	80.0	59.1	15.0	57.9	13.6	12.5	3.8	
11 years	20.0	31.8	35.0	5.3	0.0	0.0	0.0	
12 years	0.0	9.1	25.0	5.3	22.7	18.8	3.8	
13 years	0.0	0.0	15.0	26.3	22.7	0.0	11.5	
14 years	0.0	0.0	10.0	5.3	22.7	31.3	15.4	
15 years	0.0	0.0	0.0	0.0	4.5	25.0	19.2	
16 years	0.0	0.0	0.0	0.0	0.0	6.3	26.9	
17 years	0.0	0.0	0.0	0.0	9.1	6.3	19.2	
18 years or older	0.0	0.0	0.0	0.0	4.5	0.0	0.0	
Sample N	20	22	20	19	22	15	26	144

TABLE 70

Current Use of Inhalants

	Current Use of Inhalants		Sample N
	Yes	No	
Males [a] Weighted Total Percentage	4.2	95.8	1687
Females [b] Weighted Total Percentage	2.5	97.5	1607
Total [c] Weighted Total Percentage	3.4	96.6	3297

Note. – Grade differences are not significant.

[a] $\chi^2 = 10.22$; df = 6; $p > 0.01$.

[b] $\chi^2 = 7.46$; df = 6; $p > 0.01$.

[c] $\chi^2 = 12.47$; df = 6; $p > 0.01$.

TABLE 71

Inhalant Users' Current Frequency of Inhalant Use

	Current Frequency					Sample N
	Once a day or more	About 3 or 4 times a week	About once or twice a week	About 2 or 3 times a month	Once a month or less	
Weighted Total Percentage	11.8	7.5	14.1	15.3	51.4	109

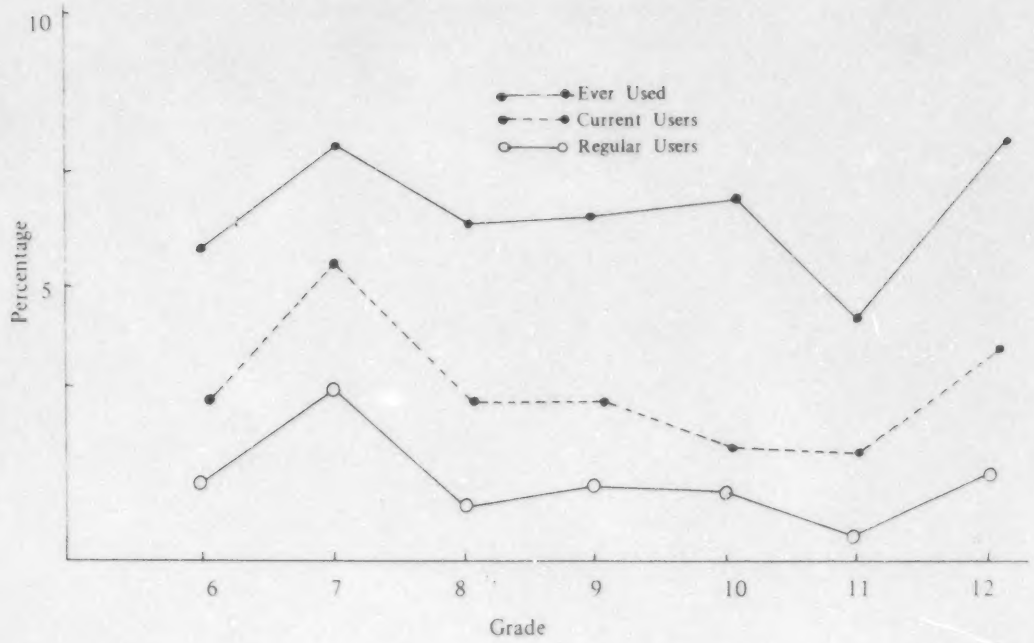

FIG. 7. Percentage of Inhalant Users at Each Grade Level

TABLE 72

Amount of Inhalant Used Each Time by Current Users

	Amount Used Each Time			Sample N
	More than most other inhalant users	About the same as other inhalant users	Less than most other inhalant users	
Weighted Total Percentage	9.0	20.9	70.1	115

TABLE 73

Users' Present Frequency of Inhalant Use Compared with Six Months Ago

	Present Frequency Compared with Six Months Ago			Sample N
	More often now	About the same	Less often now	
Weighted Total Percentage	19.5	30.0	50.5	103

TABLE 74

Users' Usual Source of Inhalants

Usual Source	Weighted Total Percentage
From friends	12.9
From a cabinet at home	26.5
From my parents	11.3
From my brothers or sisters	5.2
From a grocery or hardware shop	23.1
Other	20.9
Sample N	126

TABLE 75

Inhalant Users' Opinion of Their Parents' Awareness of Their Inhalant Use

	Users' Opinion of Parents' Awareness		Sample N
	My parents are aware I use it	My parents are not aware I use it	
Weighted Total Percentage	34.5	65.5	108

TABLE 76

Use of Stimulants

Ever Used	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	4.4	2.5	4.0	8.6	7.8	5.8	10.4	5.7
No	95.6	97.5	96.0	91.4	92.2	94.2	89.6	94.3
Sample N	252	244	227	209	269	208	260	1669
Females[b]								
Yes	3.8	0.5	5.0	9.5	6.5	7.5	10.7	5.6
No	96.2	99.5	95.0	90.5	93.5	92.5	89.3	94.4
Sample N	237	207	259	285	170	213	214	1585
Total[c]								
Yes	4.1	1.5	4.5	9.1	7.3	6.7	10.5	5.6
No	95.9	98.5	95.5	90.9	92.7	93.3	89.5	94.4
Sample N	490	452	486	494	440	421	476	3259

[a] $\chi^2 = 19.92$; df = 6; $p < 0.01$.

[b] $\chi^2 = 30.64$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 48.13$; df = 6; $p < 0.0001$.

TABLE 77

Opportunity for Use of Stimulants

Opportunity for Use	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I have been offered it	6.1	6.2	8.5	15.7	13.7	13.1	21.3	10.8
I have never been offered it	93.9	93.8	91.5	84.3	86.3	86.9	78.7	89.2
Sample N	495	454	496	497	445	426	478	3291

$\chi^2 = 74.21$; df = 6; $p < 0.0001$.

TABLE 78

Use of Stimulants if Offered by a Good Friend

Use if Offered	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Yes I am sure I would	2.0	1.8	1.2	2.2	2.2	2.3	3.3	2.0
Yes I might	4.0	4.6	5.9	11.6	13.2	14.3	17.6	8.7
I don't know	10.5	10.7	10.9	16.3	12.3	14.3	14.4	12.4
No	83.4	82.9	82.0	69.9	72.2	69.0	64.6	76.9
Sample N	494	456	495	498	446	426	478	3293

$\chi^2 = 111.54$; df = 18; $p < 0.0001$.

TABLE 79

Perceived Danger to Health of Using Stimulants

Perceived Danger	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Very dangerous	62.1	75.9	59.4	38.2	36.4	34.7	24.7	52.0
Fairly dangerous	26.9	16.0	30.6	45.2	38.5	40.3	44.9	32.4
Only slightly dangerous	8.3	5.1	8.1	13.1	20.5	21.3	26.3	12.4
Not dangerous at all	2.8	3.1	1.8	3.5	4.6	3.7	4.1	3.2
Sample N	253	294	271	283	239	267	317	1924

$\chi^2 = 244.59$; df = 18; $p < 0.0001$.

TABLE 80

Number of Students' Five Best Friends using Stimulants

	Number of Friends						Sample N
	Five friends	Four friends	Three friends	Two friends	One friend	None	
Weighted Total Percentage	1.6	0.7	1.3	2.0	3.1	91.3	2252

Note. – Grade differences are not significant.

($\chi^2 = 50.18$; df = 30; $p > 0.01$)

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TABLE 81

Students' Anticipated Use of Stimulants in One Year's Time

Anticipated Use	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I'm sure I will be using it	1.0	0.7	0.2	2.2	0.7	1.9	1.3	1.0
I might be using it	1.6	2.6	4.3	4.2	4.9	5.6	6.3	3.8
I'm not sure	15.1	11.0	10.1	16.1	15.3	18.1	20.5	14.2
I won't be using it	82.3	85.7	85.4	77.5	79.1	74.4	72.0	81.0
Sample N	497	456	494	498	445	426	478	3294

$\chi^2 = 61.20$; df = 18; $p < 0.0001$.

TABLE 82

Age at First Use of Stimulants

Age	Grade Percentage							Total
	6	7	8	9	10	11	12	
10 years or less	64.7	60.0	37.5	20.7	11.5	26.1	10.0	
11 years	29.4	20.0	25.0	3.4	3.8	4.3	2.5	
12 years	5.9	0.0	25.0	13.8	7.7	0.0	2.5	
13 years	0.0	20.0	12.5	44.8	23.1	4.3	10.0	
14 years	0.0	0.0	0.0	13.8	26.9	13.0	10.0	
15 years	0.0	0.0	0.0	3.4	15.4	47.8	15.0	
16 years	0.0	0.0	0.0	0.0	11.5	4.3	37.5	
17 years	0.0	0.0	0.0	0.0	0.0	0.0	12.5	
18 years or older	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Sample N	17	5	16	29	26	23	40	156

TABLE 83

Current Oral Use of Stimulants

Current Oral Use of Stimulants	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	3.2	1.6	3.9	4.8	6.2	4.3	6.5	4.1
No	96.8	98.4	96.1	95.2	93.8	95.7	93.5	95.9
Sample N	253	246	231	209	274	210	262	1685
Females[b]								
Yes	1.3	0.5	3.0	7.7	3.5	5.1	6.9	3.6
No	98.7	99.5	97.0	92.3	96.5	94.9	93.1	96.4
Sample N	239	210	263	287	170	217	217	1603
Total[c]								
Yes	2.2	1.1	3.4	6.5	5.2	4.7	6.7	3.9
No	97.8	98.9	96.6	93.5	94.8	95.3	93.3	96.1
Sample N	493	457	494	496	445	425	479	3289

[a] Grade differences are not significant. ($\chi^2 = 11.44$; df = 6; $p > 0.01$)

[b] $\chi^2 = 31.86$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 34.74$; df = 6; $p < 0.0001$.

TABLE 84

Current Use of Stimulants by Injection

	Current Use of Stimulants by Injection		Sample N
	Yes	No	
Males[a]			
Weighted Total Percentage	1.0	99.0	1685
Females[b]			
Weighted Total Percentage	0.6	99.4	1603
Total[c]			
Weighted Total Percentage	0.8	99.2	3291

Note. -- Grade differences are not significant.

[a] $\chi^2 = 4.07$; df = 6; $p > 0.01$.

[b] $\chi^2 = 8.52$; df = 6; $p > 0.01$.

[c] $\chi^2 = 6.27$; df = 6; $p > 0.01$.

TABLE 85

Current Use of Any Stimulants

Current Use of Any Stimulants	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	3.2	2.0	3.9	4.7	6.6	4.3	6.5	4.2
No	96.8	98.0	96.1	95.3	93.4	95.7	93.5	95.8
Sample N	253	246	231	211	274	210	262	1687
Females[b]								
Yes	1.7	0.5	3.0	8.0	3.5	5.1	6.9	3.8
No	98.3	99.5	97.0	92.0	96.5	94.9	93.1	96.2
Sample N	240	210	263	287	170	217	217	1604
Total[c]								
Yes	2.4	1.3	3.4	6.6	5.4	4.7	6.7	4.0
No	97.6	98.7	96.6	93.4	94.6	95.3	93.3	96.0
Sample N	494	457	494	498	445	427	479	3294

[a] Grade differences are not significant ($\chi^2 = 10.78$; df = 6; $p > 0.01$).

[b] $\chi^2 = 31.88$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 32.89$; df = 6; $p < 0.0001$.

TABLE 86

Stimulant Users' Current Frequency of Oral Stimulant Use

	Current Frequency					Sample N
	Once a day or more	About 3 or 4 times a week	About once or twice a week	About 2 or 3 times a month	Once a month or less	
Weighted Total Percentage	7.8	11.2	8.2	18.7	54.1	138

TABLE 87

Stimulant Users' Current Frequency of Stimulant Use by Injection

	Current Frequency					Sample N
	Once a day or more	About 3 or 4 times a week	About once or twice a week	About 2 or 3 times a month	Once a month or less	
Weighted Total Percentage	17.9	9.1	23.0	6.5	43.5	24

TABLE 88

Amount of Stimulant Used Each Time by Current Users

	Amount Used Each Time			Sample N
	More than most other stimulant users	About the same as other stimulant users	Less than most other stimulant users	
Weighted Total Percentage	4.2	28.3	67.5	134

TABLE 89

Users' Present Frequency of Stimulant Use Compared with Six Months Ago

	Present Frequency Compared with Six Months Ago			Sample N
	More often now	About the same	Less often now	
Weighted Total Percentage	11.6	44.4	44.0	122

TABLE 90

Users' Usual Source of Stimulants

Usual Source	Weighted Total Percentage
From friends	28.3
From the medicine cabinet at home	10.4
From my parents	14.5
From my brothers or sisters	4.1
From a chemist shop, with a doctor's prescription	14.0
From a chemist shop, without a doctor's prescription	6.4
From a dealer in drugs	6.6
By theft	0.4
Other	15.3
Sample N	143

TABLE 91

Stimulant Users' Opinion of Their Parents' Awareness of Their Stimulant Use

	Users' Opinion of Their Parents' Awareness		Sample N
	My parents are aware I use it	My parents are not aware I use it	
Weighted Total Percentage	54.7	45.3	120

TABLE 92

Use of Hallucinogens

Ever Used	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males [a]								
Yes	0.4	2.0	2.6	1.4	5.5	2.9	7.6	2.8
No	99.6	98.0	97.4	98.6	94.5	97.1	92.4	97.2
Sample N	252	245	229	211	274	210	262	1683
Females [b]								
Yes	0.8	1.0	1.1	2.5	1.8	2.3	7.0	1.8
No	99.2	99.0	98.9	97.5	98.2	97.7	93.0	98.2
Sample N	239	209	262	284	170	217	214	1595
Total [c]								
Yes	0.6	1.5	1.8	2.0	4.0	2.6	7.3	2.3
No	99.4	98.5	98.2	98.0	96.0	97.4	92.7	97.7
Sample N	492	455	491	495	445	426	477	3281

[a] $\chi^2 = 26.55$; df = 6; $p < 0.0001$.

[b] $\chi^2 = 18.05$; df = 6; $p < 0.01$.

[c] $\chi^2 = 39.18$; df = 6; $p < 0.0001$.

TABLE 93

Opportunity for Use of Hallucinogens

Opportunity for Use	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I have been offered it	3.6	5.3	3.4	6.4	8.8	12.0	15.1	6.4
I have never been offered it	96.4	94.7	96.6	93.6	91.2	88.0	84.9	93.6
Sample N	495	456	494	498	445	426	478	3292

$\chi^2 = 58.50$; df = 6; $p < 0.0001$.

TABLE 94

Use of Hallucinogens if Offered by a Good Friend

Use if Offered	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Yes I am sure I would	0.8	1.1	0.4	1.8	1.6	2.1	3.1	1.3
Yes I might	2.2	4.6	3.7	4.0	9.2	10.3	10.9	5.4
I don't know	9.9	8.4	8.3	9.6	8.3	8.5	7.9	8.8
No	87.1	85.9	87.6	84.5	80.9	79.1	78.0	84.5
Sample N	495	454	492	498	445	426	478	3288

$\chi^2 = 70.42$; df = 18; $p < 0.0001$.

TABLE 95

Perceived Danger to Health of Using Hallucinogens

Perceived Danger	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Very dangerous	75.3	80.4	76.5	74.4	66.7	65.3	55.8	72.9
Fairly dangerous	18.4	14.0	18.3	22.2	25.1	27.7	33.0	21.0
Only slightly dangerous	4.9	3.3	4.2	2.5	5.4	4.3	7.6	4.3
Not dangerous at all	1.5	2.3	1.0	0.9	2.9	2.7	3.5	1.9
Sample N	267	301	289	320	278	300	343	2098

$\chi^2 = 57.03$; df = 18; $p < 0.0001$.

TABLE 96

Number of Student's Five Best Friends using Hallucinogens

Number of Friends	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Five friends	1.0	0.0	0.8	0.8	1.1	2.3	1.5	0.9
Four friends	0.3	1.3	0.6	0.8	1.7	0.3	2.3	1.0
Three friends	0.3	1.3	1.1	0.5	1.7	1.1	4.0	1.2
Two friends	0.3	0.3	0.8	0.8	1.1	2.5	3.5	1.0
One friend	0.7	1.3	2.5	2.1	2.2	4.8	4.8	2.2
None	97.4	95.9	94.1	94.9	92.2	89.0	83.9	93.7
Sample N	303	320	358	376	361	354	398	2470

$\chi^2 = 70.83$; df = 30; $p < 0.0001$.

TABLE 97

Students' Anticipated Use of Hallucinogens in One Year's Time

Anticipated Use	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I'm sure I will be using it	0.2	0.4	0.4	1.0	0.7	0.9	1.0	0.6
I might be using it	1.0	2.4	2.0	1.2	4.0	4.9	6.7	2.6
I'm not sure	11.4	6.4	8.5	11.5	9.9	11.0	10.7	9.6
I won't be using it	87.4	90.8	89.1	86.3	85.4	83.1	81.6	87.2
Sample N	493	456	494	497	445	426	478	3289

$\chi^2 = 52.62$; df = 18; $p < 0.0001$.

TABLE 98

Age at First Use of Hallucinogens

Age	Grade Percentage							Total
	6	7	8	9	10	11	12	
10 years or less	100.0	50.0	40.0	0.0	0.0	0.0	0.0	
11 years	0.0	16.7	20.0	0.0	0.0	0.0	0.0	
12 years	0.0	16.7	20.0	12.5	0.0	10.0	3.0	
13 years	0.0	16.7	20.0	25.0	30.8	0.0	0.0	
14 years	0.0	0.0	0.0	37.5	0.0	0.0	9.1	
15 years	0.0	0.0	0.0	12.5	69.2	60.0	27.3	
16 years	0.0	0.0	0.0	0.0	0.0	20.0	30.3	
17 years	0.0	0.0	0.0	0.0	0.0	10.0	24.2	
18 years or older	0.0	0.0	0.0	12.5	0.0	0.0	6.1	
Sample N	1	6	5	8	13	10	33	76

TABLE 99

Current Use of Hallucinogens

Current Use of Hallucinogens	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	0.4	2.0	2.2	0.9	3.3	1.9	4.2	2.0
No	99.6	98.0	97.8	99.1	96.7	98.1	95.8	98.0
Sample N	254	246	231	211	275	210	262	1689
Females[b]								
Yes	0.0	1.0	0.0	2.1	0.6	0.5	5.1	1.0
No	100.0	99.0	100.0	97.9	99.4	99.5	94.9	99.0
Sample N	239	210	263	287	170	217	217	1603
Total[c]								
Yes	0.2	1.5	1.0	1.6	2.2	1.2	4.6	1.5
No	99.8	98.5	99.0	98.4	97.8	98.8	95.4	98.5
Sample N	494	457	494	498	446	427	479	3295

[a] Grade differences are not significant. ($\chi^2 = 10.96$; df = 6; $p > 0.01$)

[b] $\chi^2 = 26.36$; df = 6; $p < 0.001$.

[c] $\chi^2 = 23.03$; df = 6; $p < 0.001$.

TABLE 100

Hallucinogen Users' Current Frequency of Hallucinogen Use

	Current Frequency					Sample N
	Once a day or more	About 3 or 4 times a week	About once or twice a week	About 2 or 3 times a month	Once a month or less	
Weighted Total Percentage	13.4	9.8	7.5	14.1	55.1	58

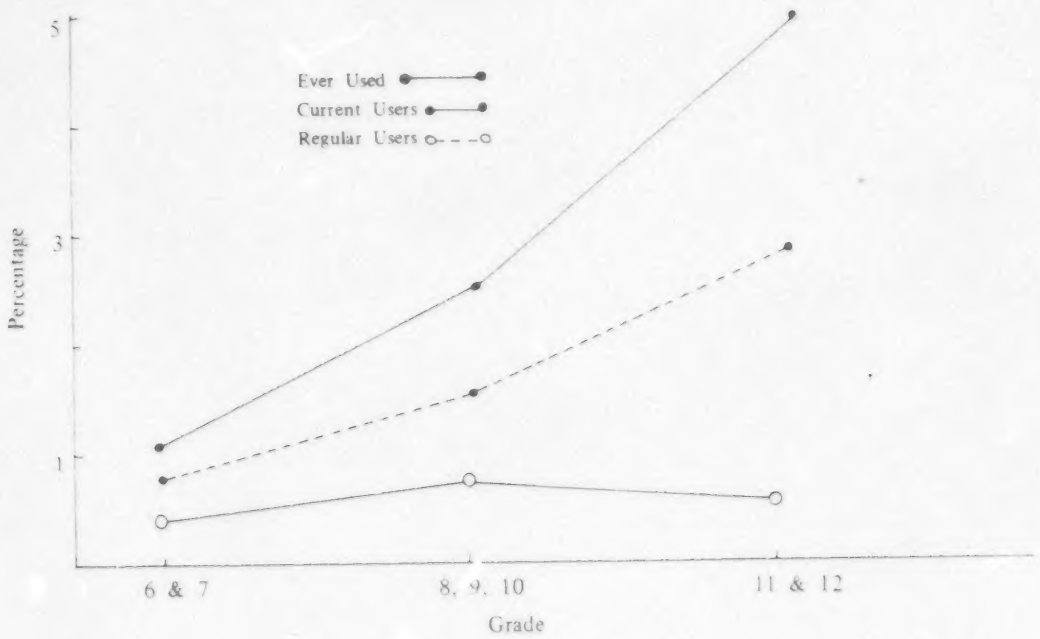

FIG. 8. Percentage of Hallucinogen Users at Each Grade Level

TABLE 101

Amount of Hallucinogen Used Each Time by Current Users

	Amount Used Each Time			Sample N
	More than most other hallucinogen users	About the same as other hallucinogen users	Less than most other hallucinogen users	
Weighted Total Percentage	7.7	49.8	42.5	59

TABLE 102

Users' Present Frequency of Hallucinogen Use Compared with Six Months Ago

	Present Frequency Compared with Six Months Ago			Sample N
	More often now	About the same	Less often now	
Weighted Total Percentage	21.1	33.1	45.8	61

TABLE 103

Users' Usual Source of Hallucinogens

Usual Source	Weighted Total Percentage
From friends	34.6
From my parents	15.9
From my brothers or sisters	6.5
From a dealer in drugs	11.2
Found growing naturally	22.4
I grow my own	3.9
Other	5.5
Sample N	73

TABLE 104

Hallucinogen Users' Opinion of Their Parents' Awareness of Their Hallucinogen Use

	Users' Opinion of Their Parents' Awareness		Sample N
	My parents are aware I use it	My parents are not aware I use it	
Weighted Total Percentage	21.1	78.9	60

TABLE 105

Use of Narcotics

	Ever Used		Sample N
	Yes	No	
Males[a] Weighted Total Percentage	2.3	97.7	1672
Females[b] Weighted Total Percentage	1.4	98.6	1587
Total[c] Weighted Total Percentage	1.9	98.1	3262

Note. – Grade differences are not significant.

[a] $\chi^2 = 3.92$; df = 6; $p > 0.01$.

[b] $\chi^2 = 11.59$; df = 6; $p > 0.01$.

[c] $\chi^2 = 3.10$; df = 6; $p > 0.01$.

TABLE 106

Opportunity for Use of Narcotics

Opportunity for Use	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I have been offered it	1.8	3.5	3.6	6.2	5.4	7.5	10.1	4.7
I have never been offered it	98.2	96.5	96.4	93.8	94.6	92.5	89.9	95.3
Sample N	493	457	494	497	446	426	477	3290

$\chi^2 = 34.94$; df = 6; $p < 0.0001$.

TABLE 107

Use of Narcotics if Offered by a Good Friend

	Use if Offered				Sample N
	Yes I am sure I would	Yes I might	I don't know	No	
Weighted Total Percentage	0.5	4.8	9.1	85.5	3288

Note – Grade differences are not significant.

(χ^2 = 29.72; df = 18; p > 0.01)

TABLE 108

Perceived Danger to Health of Using Narcotics

	Perceived Danger				Sample N
	Very dangerous	Fairly dangerous	Only slightly dangerous	Not dangerous at all	
Weighted Total Percentage	74.3	21.4	3.2	1.1	2135

Note – Grade differences are not significant.

(χ^2 = 25.71; df = 18; p > 0.01)

TABLE 109

Number of Student's Five Best Friends using Narcotics

	Number of Friends						Sample N
	Five friends	Four friends	Three friends	Two friends	One friend	None	
Weighted Total Percentage	0.5	0.4	0.6	1.0	2.6	95.0	2457

Note – Grade differences are not significant.

(χ^2 = 44.09; df = 30; p > 0.01)

TABLE 110

Students' Anticipated Use of Narcotics in One Year's Time

	Anticipated Use				Sample N
	I'm sure I will be using it	I might be using it	I'm not sure	I won't be using it	
Weighted Total Percentage	0.6	2.0	9.0	88.4	3282

Note. – Grade differences are not significant.

($\chi^2 = 17.51$; df = 18; $p > 0.01$)

TABLE 111

Age at First Use of Narcotics

Age	Grade Percentage							Total
	6	7	8	9	10	11	12	
10 years or less	75.0	50.0	22.2	0.0	0.0	14.3	0.0	
11 years	0.0	50.0	22.2	0.0	0.0	0.0	0.0	
12 years	25.0	0.0	44.4	0.0	0.0	0.0	0.0	
13 years	0.0	0.0	11.1	40.0	0.0	0.0	0.0	
14 years	0.0	0.0	0.0	40.0	0.0	28.6	0.0	
15 years	0.0	0.0	0.0	0.0	0.0	28.6	12.5	
16 years	0.0	0.0	0.0	20.0	50.0	14.3	62.5	
17 years	0.0	0.0	0.0	0.0	0.0	14.3	12.5	
18 years or older	0.0	0.0	0.0	0.0	50.0	0.0	12.5	
Sample N	4	2	9	5	2	8	7	37

TABLE 112

Current Oral Use of Narcotics

	Current Oral Use of Narcotics		Sample N
	Yes	No	
Males[a]			
Weighted Total Percentage	1.1	98.9	1688
Females[b]			
Weighted Total Percentage	0.4	99.6	1604
Total[c]			
Weighted Total Percentage	0.8	99.2	3295

Note. – Grade differences are not significant.

[a] $\chi^2 = 6.03$; df = 6; $p > 0.01$.

[b] $\chi^2 = 11.25$; df = 6; $p > 0.01$.

[c] $\chi^2 = 4.04$; df = 6; $p > 0.01$.

TABLE 113

Current Use of Narcotics by Injection

	Current Use by Injection of Narcotics		Sample N
	Yes	No	
Males[a]			
Weighted Total Percentage	0.9	99.1	1687
Females[b]			
Weighted Total Percentage	0.2	99.8	1604
Total[c]			
Weighted Total Percentage	0.6	99.4	3294

Note. -- Grade differences are not significant.

[a] $\chi^2 = 3.99$; df = 6; $p > 0.01$.

[b] $\chi^2 = 8.70$; df = 6; $p > 0.01$.

[c] $\chi^2 = 3.84$; df = 6; $p > 0.01$.

TABLE 114

Current Use of Any Narcotics

	Current Use of Narcotics		Sample N
	Yes	No	
Males[a]			
Weighted Total Percentage	1.3	98.7	1688
Females[b]			
Weighted Total Percentage	0.5	99.5	1604
Total[c]			
Weighted Total Percentage	0.9	99.1	3295

Note. – Grade differences are not significant.

[a] $\chi^2 = 6.92$; df = 6; $p > 0.01$.

[b] $\chi^2 = 9.80$; df = 6; $p > 0.01$.

[c] $\chi^2 = 3.40$; df = 6; $p > 0.01$.

TABLE 115

Narcotics Users Current Frequency of Oral Narcotics Use

	Current Frequency					Sample N
	Once a day or more	About 3 or 4 times a week	About once or twice a week	About 2 or 3 times a month	Once a month or less	
Weighted Total Percentage	20.1	23.3	14.2	16.7	25.7	25

TABLE 116

Narcotics Users' Current Frequency of Narcotics Use by Injection

	Current Frequency					Sample N
	Once a day or more	About 3 or 4 times a week	About once or twice a week	About 2 or 3 times a month	Once a month or less	
Weighted Total Percentage	17.4	19.4	14.8	15.8	32.6	19

TABLE 117

Amount of Narcotics Used Each Time by Current Users

	Amount Used Each Time			Sample N
	More than most other narcotics users	About the same as other narcotics users	Less than most other narcotics users	
Weighted Total Percentage	27.1	41.8	31.1	33

TABLE 118

Users' Present Frequency of Narcotics Use Compared with Six Months Ago

	Present Frequency Compared with Six Months Ago			Sample N
	More often now	About the same	Less often now	
Weighted Total Percentage	43.3	35.8	21.0	30

TABLE 119

Users' Usual Source of Narcotics

Usual Source	Weighted Total Percentage
From friends	26.9
From the medicine cabinet at home	11.6
From my parents	12.4
From my brothers or sisters	0.0
From a chemist shop with a doctor's prescription	10.5
From a chemist shop without a doctor's prescription	0.0
From a dealer in drugs	17.4
By theft	16.1
Other	5.1
Sample N	36

TABLE 120

Narcotics Users' Opinion of Their Parents' Awareness of Their Narcotics Use

	Users' Opinion of Their Parents' Awareness		Sample N
	My parents are aware I use it	My parents are not aware I use it	
Weighted Total Percentage	31.5	68.5	32

TABLE 121

Use of Depressants

Ever Used	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	5.2	2.5	2.2	6.7	7.3	4.3	11.1	5.1
No	94.8	97.5	97.8	93.3	92.7	95.7	88.9	94.9
Sample N	251	240	228	209	273	210	262	1673
Females[b]								
Yes	1.3	1.4	3.1	6.0	5.9	8.3	11.1	4.2
No	98.7	98.6	96.9	94.0	94.1	91.7	88.9	95.8
Sample N	239	207	261	285	170	217	217	1596
Total[c]								
Yes	3.3	2.0	2.7	6.3	6.8	6.3	11.1	4.7
No	96.7	98.0	97.3	93.7	93.2	93.7	88.9	95.3
Sample N	491	448	489	494	444	426	478	3271

[a] $\chi^2 = 21.93$; df = 6; $p < 0.01$.

[b] $\chi^2 = 31.65$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 45.69$; df = 6; $p < 0.0001$.

TABLE 122

Opportunity for Use of Depressants

Opportunity for Use	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I have been offered it	3.2	4.8	2.8	9.8	8.1	11.7	15.3	6.7
I have never been offered it	96.8	95.2	97.2	90.2	91.9	88.3	84.7	93.3
Sample N	494	454	493	498	445	426	478	3288

$\chi^2 = 72.08$; df = 6; $p < 0.0001$.

TABLE 123

Use of Depressants if Offered by a Good Friend

Use if Offered	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Yes I am sure I would	0.8	0.9	1.0	1.4	1.6	0.7	0.8	1.1
Yes I might	3.2	3.8	3.2	6.2	10.6	12.0	10.9	6.1
I don't know	13.4	9.7	11.3	14.1	11.2	9.9	13.2	11.9
No	82.6	85.7	84.4	78.3	76.6	77.4	75.0	80.9
Sample N	493	453	494	497	445	425	476	3283

$\chi^2 = 74.56$; df = 18; $p < 0.0001$.

TABLE 124

Perceived Danger to Health of Using Depressants

Perceived Danger	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Very dangerous	65.9	74.1	59.6	46.6	38.2	32.9	28.3	53.9
Fairly dangerous	22.2	17.4	29.3	37.1	37.3	42.5	47.3	30.6
Only slightly dangerous	8.7	6.0	7.7	13.8	20.7	21.4	21.0	12.5
Not dangerous at all	3.2	2.5	3.5	2.5	3.7	3.2	3.5	3.1
Sample N	252	282	287	283	241	281	314	1940

$\chi^2 = 196.48$; df = 18; $p < 0.0001$.

TABLE 125

Number of Students Five Best Friends using Depressants

	Number of Friends						Sample N
	Five friends	Four friends	Three friends	Two friends	One friend	None	
Weighted Total Percentage	1.3	1.3	0.8	1.0	2.0	93.7	2251

Note. – Grade differences are not significant.

($\chi^2 = 48.97$; df = 30; $p > 0.01$)

TABLE 126

Students' Anticipated Use of Depressants in One Year's Time

Anticipated Use	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
I'm sure I will be using it	0.6	0.7	1.0	0.4	1.3	0.9	0.2	0.8
I might be using it	1.8	3.3	2.0	3.0	5.4	5.4	3.6	3.3
I'm not sure	11.1	7.7	8.3	14.3	11.7	13.8	14.2	11.0
I won't be using it	86.4	88.3	88.6	82.3	81.6	79.8	82.0	84.9
Sample N	494	452	493	497	445	426	478	3285

$\chi^2 = 45.02$; df = 18; $p < 0.001$.

TABLE 127

Age at First Use of Depressants

Age	Grade Percentage							Total
	6	7	8	9	10	11	12	
10 years or less	55.6	33.3	40.0	13.6	4.3	12.5	4.5	
11 years	11.1	16.7	20.0	0.0	8.7	4.2	0.0	
12 years	22.2	16.7	40.0	18.2	13.0	8.3	2.3	
13 years	0.0	33.3	0.0	45.5	17.4	16.7	6.8	
14 years	0.0	0.0	0.0	18.2	30.4	25.0	13.6	
15 years	11.1	0.0	0.0	4.5	17.4	29.2	22.7	
16 years	0.0	0.0	0.0	0.0	4.3	4.2	38.6	
17 years	0.0	0.0	0.0	0.0	0.0	0.0	6.8	
18 years or older	0.0	0.0	0.0	0.0	4.3	0.0	4.5	
Sample N	9	6	10	22	23	23	43	136

TABLE 128

Current Use of Depressants

Current Use of Depressants	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	3.1	2.1	1.7	3.3	4.4	2.9	6.9	3.2
No	96.9	97.9	98.3	96.7	95.6	97.1	93.1	96.8
Sample N	245	243	230	209	275	210	262	1683
Females[b]								
Yes	0.4	1.0	2.3	5.2	4.1	6.0	4.2	2.9
No	99.6	99.0	97.7	94.8	95.9	94.0	95.8	97.1
Sample N	239	210	263	287	170	217	217	1603
Total[c]								
Yes	1.8	1.5	2.0	4.4	4.3	4.5	5.6	3.1
No	98.2	98.5	98.0	95.6	95.7	95.5	94.4	96.9
Sample N	494	454	493	496	446	427	479	3289

[a] Grade differences are not significant.
($\chi^2 = 9.52$; df = 6; $p > 0.01$)

[b] $\chi^2 = 22.19$; df = 6; $p < 0.01$.

[c] $\chi^2 = 22.12$; df = 6; $p < 0.01$.

TABLE 129

Depressant Users' Current Frequency of Depressant Use

	Current Frequency					Sample N
	Once a day or more	About 3 or 4 times a week	About once or twice a week	About 2 or 3 times a month	Once a month or less	
Weighted Total Percentage	9.7	3.4	10.2	13.0	63.7	112

TABLE 130

Number of Depressant Pills Taken Each Time by Current Users

	Number of Pills Taken Each Time				Sample N
	Four or more pills	Three pills	Two pills	One pill	
Weighted Total Percentage	8.4	4.5	25.9	61.2	118

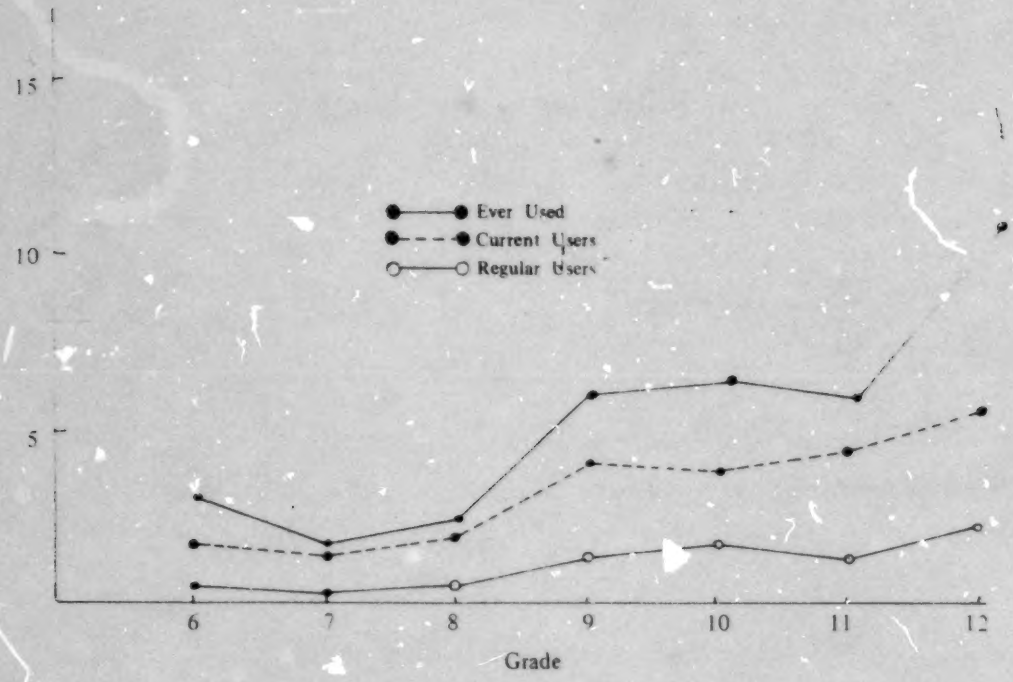

FIG. 9. Percentage of Depressant Users at Each Grade Level

TABLE 131

Users' Present Frequency of Depressant Use Compared with Six Months Ago

	Present Frequency Compared with Six Months Ago			Sample N
	More often now	About the same	Less often now	
Weighted Total Percentage	11.5	44.0	44.5	105

TABLE 132

Users' Usual Source of Depressants

Usual Source	Weighted Total Percentage
From friends	13.4
From the medicine cabinet at home	19.5
From my parents	31.5
From my brothers or sisters	0.0
From a chemist shop with a doctor's prescription	22.7
From a chemist shop without a doctor's prescription	2.7
From a dealer in drugs	1.8
By theft	4.9
Other	3.4
Sample N	134

TABLE 133

Depressant Users' Opinion of Their Parents' Awareness of Their Depressant Use

	Users' Opinion of Their Parents' Awareness		Sample N
	My parents are aware I use it	My parents are not aware I use it	
Weighted Total Percentage	64.0	36.0	117

TABLE 134

Use of Any Drugs

Ever Used	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	16.9	15.9	13.9	21.3	24.4	21.1	30.2	19.4
No	83.1	84.1	86.1	78.7	75.6	78.9	69.8	80.6
Sample N	255	246	231	211	275	210	262	1690
Females[b]								
Yes	9.5	7.1	13.6	18.5	14.1	21.2	32.4	14.4
No	90.5	92.9	86.4	81.5	85.9	78.8	67.6	85.6
Sample N	241	210	265	287	170	217	217	1607
Total[c]								
Yes	13.3	11.8	13.7	19.7	20.4	21.1	31.3	16.9
No	86.7	88.2	86.3	80.3	79.6	78.9	68.7	83.1
Sample N	497	457	496	498	446	427	479	3300

[a] $\chi^2 = 23.29$; df = 6; $p < 0.001$.

[b] $\chi^2 = 50.42$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 61.34$; df = 6; $p < 0.0001$.

TABLE 135

Current Use of Any Drugs

Current Use of Any Drug(s)	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Males[a]								
Yes	9.0	11.0	9.1	13.3	13.8	14.8	19.5	12.0
No	91.0	89.0	90.0	86.7	86.2	85.2	80.5	88.0
Sample N	255	246	231	211	275	210	262	1690
Females[b]								
Yes	4.1	5.7	6.0	13.6	8.2	12.9	19.0	8.7
No	95.9	94.3	94.0	86.4	91.8	87.1	81.0	91.3
Sample N	241	210	265	287	170	217	217	1607
Total[c]								
Yes	6.6	8.5	7.5	13.5	11.7	13.8	19.4	10.4
No	93.4	91.5	92.5	86.5	88.3	86.2	80.6	89.6
Sample N	497	457	496	498	446	427	479	3300

[a] Grade differences are not significant.
($\chi^2 = 13.11$; df = 6; $p > 0.01$)

[b] $\chi^2 = 38.29$; df = 6; $p < 0.0001$.

[c] $\chi^2 = 43.92$; df = 6; $p < 0.0001$.

TABLE 136

Users' Reasons for Taking Drugs

Main Reason for Taking Drugs	Weighted Total Percentage
To get a "high" (a feeling of well-being)	24.5
To help me relax	22.0
So as not to be the "odd one out" in a group	11.5
To let me forget my worries	4.9
It is worthwhile for its own sake	4.6
To defy those who are against the use of drugs	3.4
To relieve tensions	10.9
Some other reason	18.1
Sample N	175

Note. – Grade differences are not significant.
($\chi^2 = 61.39$; df = 42; $p > 0.01$)

TABLE 137

Non-Users Reasons for Not Taking Drugs

Main Reason for Not Taking Drugs	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Taking drugs would harm my health	42.9	40.0	25.9	17.8	15.6	13.0	9.5	26.4
I don't know how to get some drugs	0.3	1.6	0.3	1.5	1.6	1.4	0.7	1.1
I can enjoy life without drugs	33.1	35.7	49.4	54.3	56.2	50.5	57.6	47.7
I don't want to become dependent on drugs	9.4	9.8	9.5	12.0	11.1	16.0	11.9	10.8
It's against the law	4.9	1.6	3.4	0.3	0.0	1.0	0.0	1.9
I don't want to lose control of myself	4.2	3.9	3.7	2.5	2.9	2.7	4.7	3.5
It's against my moral principles	2.9	3.0	4.0	8.3	8.6	10.6	11.9	6.0
Some other reason	2.3	4.3	3.7	3.4	4.1	4.8	3.7	3.7
Sample N	308	305	348	326	315	292	295	2189

$\chi^2 = 251.48$; df = 42; $p < 0.0001$.

TABLE 138

Ex-Users Reasons for Giving Up Drugs

Response	Weighted Total Percentage
I had a bad drug "trip" (experience)	6.1
Taking drugs was harming my health	12.3
I thought I would get into trouble with the law	7.2
I could not get any drugs	9.9
I was becoming too dependent on drugs	3.0
I felt guilty about using drugs	9.2
I found I could enjoy life without drugs	27.8
Some other reason	24.6
Sample N	51

Note. – Grade differences are not significant.

($\chi^2 = 33.45$; df = 35; $p > 0.01$)

TABLE 139

Summary of Past or Present Drug Use

Drug	Percentage Who Have Ever Used the Drug							Weighted Total Percentage	Sample N	Missing Data Percentage
	6	7	8	9	10	11	12			
Cannabis	2.2	2.2	2.6	3.8	6.3	11.0	17.6	4.7	3288	2.39
Inhalants	5.7	7.7	6.3	6.4	6.8	4.5	7.8	6.5	3281	2.60
Stimulants	4.1	1.5	4.5	9.1	7.3	6.7	10.5	5.6	3259	3.25
Hallucinogens	0.6	1.5	1.8	2.0	4.0	2.6	7.3	2.3	3281	2.57
Narcotics	1.2	1.5	2.0	2.2	1.8	2.6	2.3	1.9	3262	3.10
Depressants	3.3	2.0	2.7	6.3	6.8	6.3	11.1	4.7	3271	3.01
Any drug	13.3	11.8	13.7	19.7	20.4	21.1	31.3	16.9	3300	1.98

TABLE 140

Summary of Current Drug Use

Drug	Percentage of Current Users							Weighted Total Percentage	Sample N	Missing Data Percentage
	6	7	8	9	10	11	12			
Cannabis	1.4	1.1	1.6	2.2	4.0	6.8	11.5	2.9	3300	1.98
Inhalants	3.0	5.5	3.0	3.0	2.2	2.1	4.0	3.4	3297	2.10
Stimulants	2.4	1.3	3.4	6.6	5.4	4.7	6.7	4.0	3294	2.21
Orally	2.2	1.1	3.4	6.5	5.2	4.7	6.7	3.9	3289	2.30
By injection	1.0	0.7	0.6	0.4	1.6	0.5	0.6	0.8	3291	2.30
Hallucinogens	0.2	1.5	1.0	1.6	2.2	1.2	4.6	1.5	3295	2.16
Narcotics	0.6	1.1	0.8	1.2	0.4	1.4	1.0	0.9	3295	2.16
Orally	0.6	1.1	0.8	1.0	0.2	0.5	1.0	0.8	3295	2.16
By injection	0.4	0.9	0.2	0.8	0.4	0.9	0.6	0.6	3294	2.21
Depressants	1.8	1.5	2.0	4.4	4.3	4.5	5.6	3.1	3289	2.39
Any drug	6.6	8.5	7.5	13.5	11.7	13.8	19.4	10.4	3300	1.98

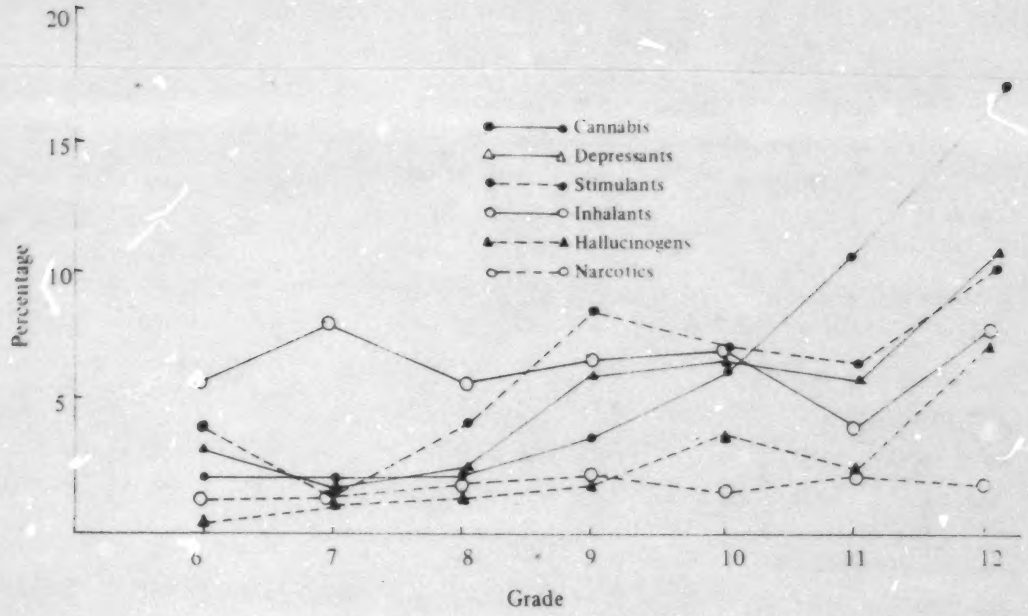

FIG. 10. Percentage of Drug Users, Either Past or Present, in Each Grade

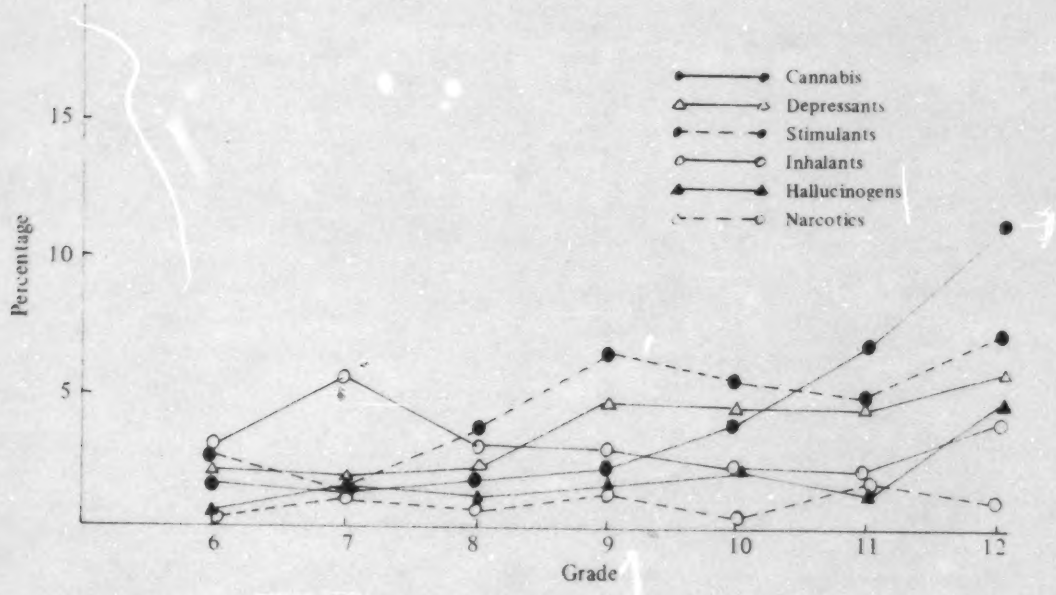

FIG. 11. Percentage of Current Drug Users in Each Grade

TABLE 141

Summary of Current Alcohol Use

Type of Alcohol	Percentage of Current Drinkers							Weighted Total Percentage	Sample N	Missing Data Percentage
	6	7	8	9	10	11	12			
Beer, Ale, Stout	26.6	43.3	39.3	48.0	61.2	58.3	65.1	45.3	3336	0.62
Wine	24.3	37.6	37.3	47.7	58.4	65.9	68.6	43.8	3342	0.47
Spirits	14.0	26.3	27.6	36.9	51.9	61.6	71.3	35.0	3339	0.56
Liqueurs	7.5	18.6	20.2	25.5	29.6	39.0	43.1	22.5	3342	0.53
Any alcohol	31.2	47.7	48.7	60.3	74.4	79.1	83.3	55.3	3345	0.41

TABLE 142

Comparative Use of Drugs, Past or Present, in New South Wales, Canberra and Queensland

Year	1974	1973	1971
Grade (Estimated Average Age in Years)	Grade 12 (17.0)	Form 5 (16.9)	Form 6 (17.9)
Location	Queensland	Canberra	New South Wales
Substance used	Percentage Who have Ever Used the Substance		
Alcohol	96.0	87.5	89.4
Marijuana	17.6	18.2	11.5
Stimulants	10.5	10.1	17.8
Hallucinogens	7.3	4.7	5.1
Narcotics	2.3	1.9	3.5
Depressants	11.1	13.0	35.0

TABLE 143

Pattern of Current Drug Use

Drug Combination	Grade Group Percentage			Weighted Total Percentage
	6, 7	8, 9, 10	11, 12	
None	57.7	37.0	18.1	42.1
Alcohol	34.6	52.5	65.7	47.7
Alcohol and stimulants	0.7	2.5	1.9	1.7
Alcohol and inhalants	2.0	0.8	1.4	1.3
Alcohol and depressants	0.7	1.3	1.9	1.2
Alcohol and cannabis	0.3	0.7	4.3	1.0
Inhalants	0.9	0.4	0.0	0.6
Depressants	0.2	0.7	0.2	0.4
Other	3.0	4.2	6.4	4.1
Sample N	938	1427	894	3259

$\chi^2 = 277.65$; df = 16; $p < 0.001$.

TABLE 144

Categories of Current Use

Current Use Category	Grade Percentage							Weighted Total Percentage
	6	7	8	9	10	11	12	
Non-users	65.6	50.4	48.4	36.5	24.0	20.7	14.8	42.1
Only alcohol occasionally	12.5	16.7	18.6	21.1	22.0	24.6	17.5	18.4
Only alcohol regularly	15.1	24.3	25.1	28.9	41.9	40.8	48.0	28.9
One drug occasionally	1.8	3.1	3.0	6.2	4.9	6.3	7.7	4.2
One drug regularly	3.2	3.1	2.2	3.4	2.9	3.1	4.0	3.0
Some drugs occasionally	0.2	0.7	1.2	1.4	0.7	1.4	3.1	1.0
Some drugs regularly	1.6	1.8	1.4	2.4	3.6	3.1	4.8	2.3
Sample N	497	456	494	498	446	427	479	3297

$\chi^2 = 393.33$; df = 36; $p < 0.0001$.

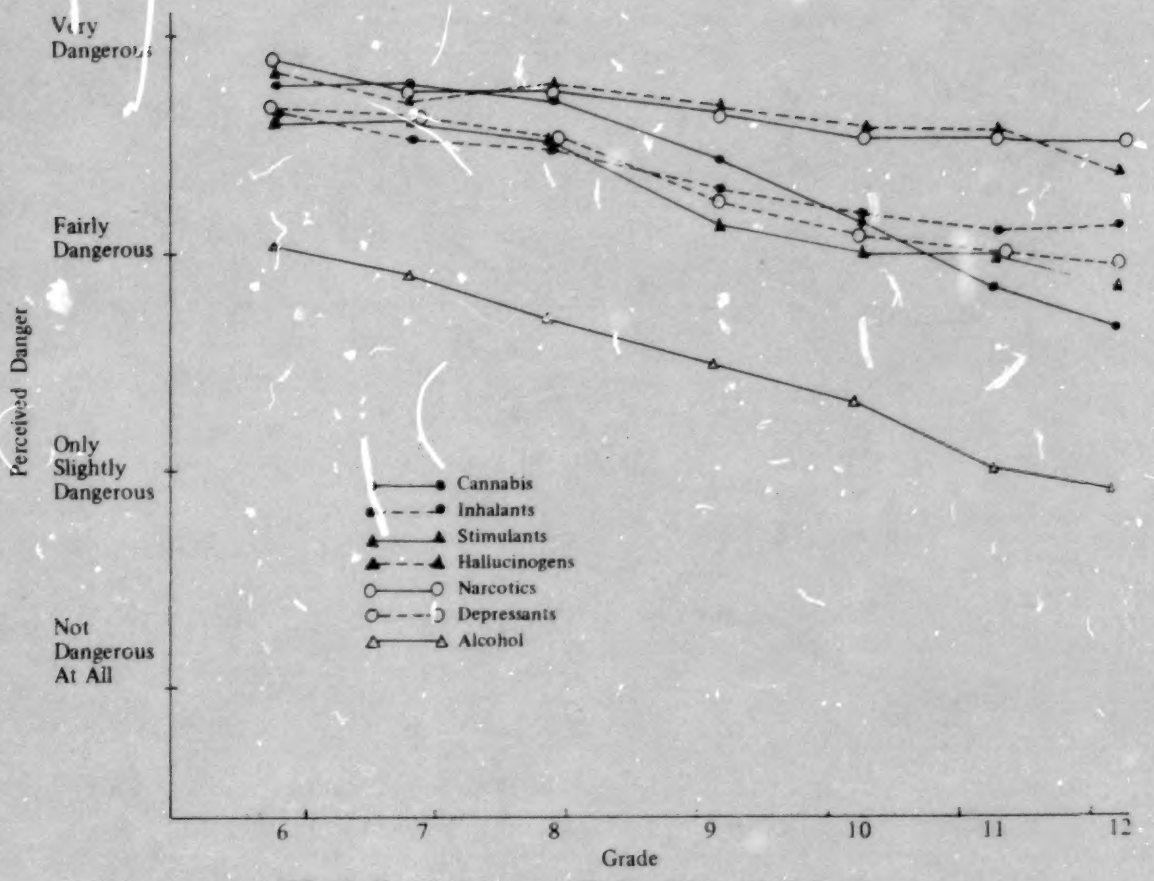

FIG. 12. Perceived Danger to Health of Using Alcohol or Drugs

TABLE 145

Analysis of Variance of Alcohol Knowledge Scale

Source	df	MS	F	p
Grade	6	634.94	124.91	0.001
Sex	1	83.48	16.42	0.001
Grade x Sex	6	6.30	1.24	>0.01
Residual	3368	5.08		

TABLE 146

Grade and Sex Means on the Alcohol Knowledge Scale

Sex	Grade Mean							Weighted Mean
	6	7	8	9	10	11	12	
Males	8.35	9.39	9.89	10.31	10.76	11.76	12.42	10.00
Females	8.27	9.11	9.26	10.14	10.57	11.23	11.74	9.66
Total	8.31	9.26	9.54	10.21	10.69	11.49	12.11	9.83

Note. – Maximum possible score is 15.

TABLE 147

Percentage in Each Grade Answering Alcohol Knowledge Items Correctly

Item	Correlation with Alcohol Scale Total (r)	Grade Percentage							Weighted Total Percentage	Significance of Grade Differences	
		6	7	8	9	10	11	12		χ^2 (df=6)	p
1. Drunkenness and alcoholism are the same thing. *(False)*	0.40	41.5	56.6	60.1	73.5	79.1	90.4	93.7	65.2	381.31	<0.0001
2. Teenagers can usually drink as much as adults before becoming drunk. *(False)*	0.38	60.2	68.8	68.2	72.3	71.3	74.0	83.3	69.3	49.64	<0.0001
3. Spirit drinks (e.g. brandy, rum, vodka) effect you more quickly than beer does. *(True)*	0.38	78.4	82.5	81.1	86.8	91.3	90.2	91.6	84.6	59.21	<0.0001
4. You can drink yourself sober. *(False)*	0.37	58.0	67.0	69.2	79.0	7[illegible].6	85.7	88.5	71.6	135.57	<0.0001
5. Drinking can make you fat. *(True)*	0.37	58.9	71.2	71.9	80.2	81.6	84.8	89.4	74.1	144.68	<0.0001
6. Hangovers always occur after drinking alcohol. *(False)*	0.37	28.4	32.5	39.5	37.3	49.8	67.4	77.5	41.4	253.98	<0.0001
7. The body can handle the amount of alcohol in an 8 oz glass of beer every hour. *(True)*	0.37	46.8	49.1	48.7	54.9	59.6	66.7	75.6	54.0	85.09	<0.0001
8. Alcoholics can be helped to control their drinking. *(True)*	0.36	68.9	78.8	83.8	88.8	89.5	91.8	93.7	83.0	154.13	<0.0001
9. Alcoholics are more likely than others to have liver trouble. *(True)*	0.35	73.9	79.7	77.6	79.0	83.9	87.8	89.4	79.9	41.53	<0.0001
10. Most of the alcohol is removed from the body by the liver. *(True)*	0.35	63.1	65.7	69.6	72.3	73.1	77.8	76.8	69.6	34.21	<0.0001
11. Alcohol has less effect on people who have been drinking for a long time. *(True)*	0.34	49.2	54.8	55.9	62.5	60.8	65.6	73.5	58.0	55.21	<0.0001
12. The legal limit for driving after drinking in Queensland is 0.1% blood alcohol content. *(False)*	0.34	41.9	45.4	49.1	55.3	62.8	70.7	71.4	53.0	126.17	<0.0001
13. All other things being equal, alcohol has the same effect on a big person as on a small person. *(False)*	0.33	52.8	53.1	51.8	54.3	55.8	60.2	63.9	54.5	13.40	>0.01
14. An 8 oz glass of beer or a 1 oz shot of rum will have about the same effect. *(True)*	0.31	67.0	70.7	70.5	68.7	71.7	72.6	74.3	70.2	6.56	>0.01
15. Drinking milk puts a lining on your stomach, and so stops you getting drunk. *(False)*	0.31	42.6	50.4	56.6	55.9	62.6	63.7	67.6	54.8	77.04	<0.0001

TABLE 147

Percentage in Each Grade Answering Alcohol Knowledge Items Correctly (cont.)

Item	Correlation with Alcohol Scale Total (r)	Grade Percentage							Weighted Total Percentage	Significance of Grade Differences	
		6	7	8	9	10	11	12		χ^2 (df=6)	p
16. Ethyl alcohol is the main drug in alcoholic drinks. *(True)*	0.29	62.3	65.9	63.6	73.3	71.1	70.0	68.3	67.3	25.36	<0.001
17. You can drink yourself to death if you take too much alcohol too quickly. *(True)*	0.29	82.2	81.7	78.0	79.8	77.4	81.0	84.3	80.2	9.24	> 0.01
18. People can become physically dependent on alcohol. *(True)*	0.26	79.7	86.9	85.7	86.6	86.3	87.1	88.5	85.3	20.46	<0.01
19. Alcohol is a valuable food. *(False)*	0.25	77.8	81.9	82.1	81.8	84.1	83.4	83.5	81.7	9.21	>0.01
20. Alcohol makes people more wide awake. *(False)*	0.15	92.2	94.5	94.2	93.2	94.2	93.7	92.3	93.6	4.30	>0.01

Note. – The alcohol knowledge scale used in the study was constructed from those items with $r \geq 0.3$.

TABLE 148

Analysis of Variance of Drug Knowledge Scale

Source	df	MS	F	p
Grade	6	923.92	179.38	0.001
Sex	1	3.12	0.61	>0.01
Grade x sex	6	11.10	2.16	>0.01
Residual	3368	5.15		

TABLE 149

Grade and Sex Means on the Drug Knowledge Scale

Sex	Grade Mean							Weighted Mean
	6	7	8	9	10	11	12	
Males	8.79	9.37	10.08	10.79	11.32	12.63	12.98	10.37
Females	8.82	9.64	9.60	10.97	11.70	12.64	13.07	10.39
Total	8.80	9.49	9.81	10.89	11.47	12.63	13.02	10.38

Note. – Maximum possible score is 16.

TABLE 150

Percentage in Each Grade Answering Drug Knowledge Items Correctly

Item	Correlation with Drug Scale Total (r)	Grade Percentage							Weighted Total Percentage	Significance of Grade Differences	
		6	7	8	9	10	11	12		χ^2 (df=6)	p
1. All drug users become dependent upon drugs. *(False)*	0.44	21.2	24.7	33.1	37.9	52.7	67.0	77.7	38.0	389.64	<0.0001
2. L.S.D. ('acid') usually has a stronger effect than marijuana ('grass', 'pot') has. *(True)*	0.43	64.2	71.6	76.1	84.6	85.4	93.7	93.7	78.1	179.18	<0.0001
3. The same amount of any drug will effect people in the same way. *(False)*	0.42	63.6	69.0	72.3	84.4	84.5	96.7	96.9	77.1	222.59	<0.0001
4. To "turn on" is to go around with people who use drugs. *(False)*	0.40	38.6	40.0	52.2	59.9	66.1	77.8	84.6	54.5	275.38	<0.0001
5. 'Pep pills' can help you stay awake if you are sleepy. *(True)*	0.37	62.1	67.9	64.5	78.6	83.9	89.5	89.6	73.2	167.88	<0.0001
6. A drug user is developing a tolerance to a drug if he needs to increase the amount of the drug to get the same effect. *(True)*	0.36	63.3	72.1	71.1	77.4	78.7	83.6	87.5	73.8	80.54	<0.0001
7. When dried banana peelings are smoked, the effects are similar to taking L.S.D. ('acid'). *(False)*	0.34	47.9	43.4	50.9	57.9	62.1	69.8	69.7	54.3	99.26	<0.0001
8. If hallucinogenic mushrooms ('magic mushrooms') are cooked, the drug in them is destroyed. *(False)*	0.34	50.8	59.2	60.9	63.9	66.6	71.4	72.7	61.5	59.34	<0.0001
9. Barbiturates ('barbs', 'downers') are not physically addictive. *(False)*	0.33	54.4	63.3	59.5	67.7	72.0	76.6	78.9	64.8	83.41	<0.0001
10. Amphetamines are called 'speed' because they give quick relief from pain. *(False)*	0.32	38.1	40.8	41.6	44.1	50.7	67.4	67.8	45.9	112.68	<0.0001
11. Marijuana ('pot', 'grass') is less likely to cause psychological damage than barbiturates ('barbs', 'downers') are. *(True)*	0.32	41.7	41.3	39.1	48.9	50.7	60.7	67.2	46.5	83.79	<0.0001
12. Natural drugs are safer than manufactured ones. *(False)*	0.32	50.4	60.3	65.5	65.1	73.1	77.3	74.1	64.1	100.48	<0.0001
13. Most people who use narcotics (e.g. heroin, opium, morphine) have used other drugs in the past. *(True)*	0.31	70.6	71.0	65.5	75.8	76.0	83.4	89.6	73.4	65.6	<0.0001

TABLE 150

Percentage in Each Grade Answering Drug Knowledge Items Correctly (cont.)

Item	Correlation with Drug Scale Total (r)	Grade Percentage							Weighted Total Percentage	Significance of Grade Differences	
		6	7	8	9	10	11	12		χ^2 (df=6)	p
14. It is safe to drink alcohol after taking barbiturates ('barbs', 'downers'). *(False)*	0.31	85.2	89.5	91.1	96.4	94.4	95.3	96.2	91.7	70.09	<0.0001
15. Depressants such as the barbiturates ('barbs', 'downers') are used by doctors to help people sleep. *(True)*	0.30	65.5	65.9	63.8	66.3	69.5	71.9	70.6	66.8	8.85	>0.01
16. Heroin is usually injected into a vein. *(True)*	0.30	62.9	70.1	74.0	80.4	80.5	81.5	84.1	74.4	87.07	<0.0001
17. A 'bummer' is a bad drug experience. *(True)*	0.25	72.2	76.0	72.8	73.5	76.5	72.8	79.3	74.3	7.50	>0.01
18. Smoking marijuana ('pot', 'grass') makes time seem to go slower. *(True)*	0.25	58.5	57.0	55.5	56.5	59.2	61.4	61.0	57.8	4.43	>0.01
19. The legal penalty for possession of certain mushrooms is the same as for possession of L.S.D. ('acid'). *(True)*	0.25	55.3	63.5	64.7	64.1	65.9	61.6	59.5	62.3	19.62	<0.01
20. 'Snow' is heroin. *(False)*	0.16	72.5	79.9	74.4	76.4	71.3	70.5	61.0	73.9	34.66	<0.0001

Note. – The drug knowledge scale used in the study was constructed from those items with $r \geq 0.3$.

TABLE 151

Percentage Agreeing with Alcohol Attitude Items in Each Grade

Item	Grade Percentage							Weighted Total Percentage	Significance of Grade Differences	
	6	7	8	9	10	11	12		χ^2 (df=24)	p
1. People who refuse a drink are anti-social.	18.6	10.7	10.4	10.9	9.9	7.9	4.6	11.5	286.24	< 0.0001
2. Women who drink are more sophisticated than women who do not drink.	14.6	13.8	12.2	11.9	7.5	5.1	3.4	11.2	305.30	< 0.0001
3. You cannot trust people who will not drink with you.	10.0	8.6	7.0	8.8	5.0	4.0	3.1	7.4	185.59	< 0.0001
4. Men who do not drink are not real men.	13.8	7.5	9.9	7.4	4.3	4.0	2.5	8.0	138.73	< 0.0001
5. To be able to drink a lot is a sign of being grown up.	11.5	9.4	7.5	7.2	5.4	4.0	2.3	7.7	164.45	< 0.0001
6. People who don't drink at parties are wet blankets.	13.0	15.3	11.4	12.2	10.8	10.1	7.1	12.1	137.93	< 0.0001
7. People who do not drink miss something enjoyable in life.	14.5	12.3	11.4	14.6	18.0	16.8	22.9	14.8	68.39	< 0.0001
8. You feel left out of things at parties if you don't drink.	26.9	30.6	27.5	32.9	36.8	31.2	33.9	30.9	141.10	< 0.0001
9. It is all right for people to drink as much as they like as long as they keep out of trouble.	42.3	48.4	41.7	48.8	63.3	43.4	46.5	46.5	78.79	< 0.0001
10. Drink is not as dangerous as people make out.	24.5	27.0	26.8	29.3	32.4	27.7	26.6	27.8	87.94	< 0.0001
11. People who drink a lot should not be allowed to drive cars.	73.1	74.7	75.1	72.2	69.1	77.9	80.5	77.7	51.87	< 0.001
12. There is nothing wrong with having a drink or two on social occasions such as parties or picnics.	77.8	87.5	86.1	85.1	87.8	91.3	89.9	85.4	92.71	< 0.0001
13. There is no harm in having a glass or two of beer after a hard day's work.	83.0	87.6	90.3	86.9	89.1	88.8	87.7	87.5	75.76	< 0.0001
14. A drink once in a while does no harm.	79.0	85.9	86.7	86.9	87.6	90.2	89.3	85.7	72.57	< 0.0001
15. There is nothing wrong with drinking, if you know when to stop.	79.0	85.6	89.6	89.2	90.8	93.5	88.5	87.2	147.78	< 0.0001
16. It is alright to have a glass or two of wine with meals.	72.1	75.2	80.4	79.3	81.7	84.8	87.2	78.6	71.55	< 0.0001
17. There is nothing wrong with drinking.	38.7	49.8	48.7	56.1	69.5	71.1	71.0	54.3	209.58	< 0.0001
18. Alcohol is bad only when people misuse it.	65.4	72.2	77.8	78.5	79.3	86.6	84.7	75.7	113.79	< 0.0001
19. Most people can drink sensibly.	65.6	68.7	70.1	71.4	74.6	66.7	64.1	69.3	68.26	< 0.0001
20. Only weak people drink.	13.6	12.1	12.1	13.1	9.5	6.8	5.9	11.4	178.29	< 0.0001
21. Public drinking is disgusting.	31.1	19.9	20.6	19.3	12.6	11.5	11.3	19.8	296.81	< 0.0001
22. Drinking makes you feel good.	14.1	19.0	20.1	34.7	41.5	48.2	57.9	28.7	336.21	< 0.0001
23. Drinking helps you have fun.	14.5	17.5	21.8	23.3	35.0	37.9	46.9	24.5	203.39	< 0.0001
24. Alcohol makes a party go better.	25.8	36.6	36.7	41.4	50.4	49.4	56.4	39.6	162.42	< 0.0001
25. Drinking can make sad people feel happy.	25.1	26.6	28.0	33.5	43.5	38.6	41.1	32.0	124.07	< 0.0001

TABLE 151

Percentage Agreeing with Alcohol Attitude Items in Each Grade (cont.)

Item	Grade Percentage							Weighted Total Percentage	Significance of Grade Differences	
	6	7	8	9	10	11	12		χ^2 (df=24)	p
26. You get on better with people after a drink or two.	24.4	30.3	24.4	28.1	37.7	37.0	42.4	30.1	109.93	<0.0001
27. Drinking makes you more self-confident.	16.5	14.3	13.7	20.7	29.9	32.8	44.0	21.2	211.77	<0.0001
28. The world would be a better place without alcohol.	53.5	48.2	44.9	39.5	33.1	30.3	23.3	44.0	301.06	<0.0001
29. People who drink a lot should be fired from their jobs.	37.8	30.9	19.5	16.3	15.1	11.2	7.3	22.5	299.60	<0.0001
30. There is nothing worse than a person who drinks a lot.	60.2	52.8	50.4	47.7	45.4	36.8	36.3	49.7	204.41	<0.0001
31. Alcoholics should not be allowed to bring up children.	43.9	42.5	42.8	38.4	40.6	45.6	38.7	41.8	49.82	<0.01
32. I would not like to be the friend of a person who drinks a lot.	57.2	52.9	43.8	38.4	33.7	32.8	33.9	44.2	178.64	<0.0001
33. Alcoholics should be put in jail.	33.9	24.3	19.5	16.5	13.8	6.8	5.5	19.9	384.62	<0.0001
34. Teenagers who drink have had a poor bringing up at home.	39.1	34.8	28.6	21.9	13.8	10.1	7.7	25.7	469.22	<0.0001

TABLE 152

Analysis of Variance of the Approval of Moderate Drinking Factor

Source	df	MS	F	p
Grade	6	757.8	7.74	0.001
Sex	1	484.7	4.95	>0.01
Grade x sex	6	102.7	1.05	>0.01
Residual	3368	97.9		

TABLE 153

Grade and Sex Means on the Approval of Moderate Drinking Factor

Sex	Grade Mean							Weighted Mean
	6	7	8	9	10	11	12	
Males	−0.8	2.8	3.1	1.8	3.6	3.2	3.3	2.2
Females	−0.3	1.6	1.8	1.9	1.8	2.6	0.9	1.4
Total	−0.5	2.3	2.4	1.9	2.8	2.9	2.2	1.8

TABLE 154

Analysis of Variance of the Beneficial Effects of Drinking Factor

Source	df	MS	F	p
Grade	6	3157.9	34.63	0.001
Sex	1	4656.9	51.14	0.001
Grade x Sex	6	147.7	1.62	>0.01
Residual	3368	91.1		

TABLE 155

Grade and Sex Means on the Beneficial Effects of Drinking Factor

Sex	Grade Mean							Weighted Mean
	6	7	8	9	10	11	12	
Males	−1.7	−1.3	−0.6	0.0	3.8	4.2	7.1	0.8
Females	−3.8	−3.8	−3.0	−0.8	0.4	1.9	2.1	−1.8
Total	−2.7	−2.5	−1.9	−0.5	2.5	3.0	4.9	−0.5

TABLE 156

Analysis of Variance of the Disapproval of Non-Drinkers Factor

Source	df	MS	F	p
Grade	6	7151.0	84.11	0.001
Sex	1	3827.9	45.02	0.001
Grade x sex	6	299.8	3.53	0.002
Residual	3368	85.0		

TABLE 157

Grade and Sex Means on the Disapproval of Non-Drinkers Factor

Sex	Grade Mean							Weighted Mean
	6	7	8	9	10	11	12	
Males	3.7	1.7	0.1	−1.6	−2.2	−5.8	−7.1	−0.4
Females	3.4	−0.3	−1.6	−3.1	−6.9	−9.6	−10.9	−2.5
Total	3.6	0.8	−0.8	−2.5	−4.0	−7.7	−8.8	−1.4

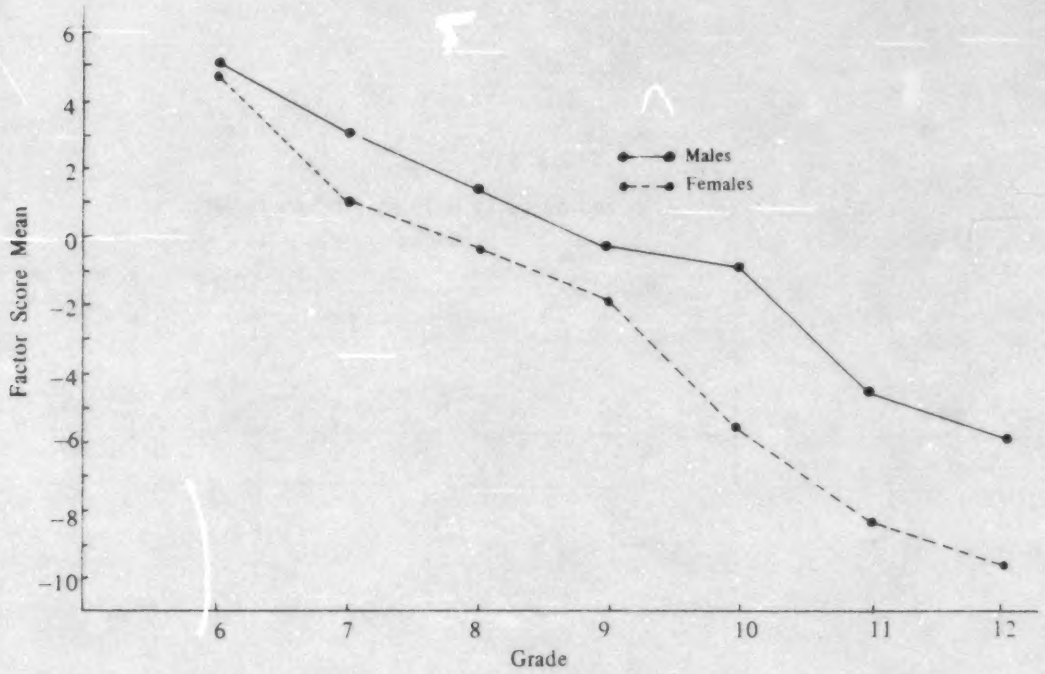

FIG. 13. Grade and Sex Effects on the Disapproval of Non-Drinkers Factor

TABLE 158

Analysis of Variance of the Antipathy to Heavy Drinkers Factor

Source	df	MS	F	p
Grade	6	212.5	45.90	0.001
Sex	1	418.9	4.56	> 0.01
Grade x sex	6	56.6	0.62	> 0.01
Residual	3368	91.8		

TABLE 159

Grade and Sex Means on the Antipathy to Heavy Drinkers Factor

Sex	Grade Mean							Weighted Mean
	6	7	8	9	10	11	12	
Males	3.9	2.4	0.2	−2.1	−2.5	−4.1	−4.2	−0.1
Females	5.2	2.1	1.1	−1.3	−2.0	−2.2	−3.6	0.7
Total	4.5	2.3	0.7	−1.6	−2.3	−3.1	−3.9	0.3

TABLE 160

Percentage Agreeing with Drug Attitude Items in Each Grade

Item	Grade Percentage							Weighted Total Percentage	Significance of Grade Differences	
	6	7	8	9	10	11	12		χ^2 (df=24)	p
1. Drug addicts should be put in jail.	52.6	45.8	35.2	26.9	26.3	11.9	5.4	34.2	492.64	<0.0001
2. You cannot trust people who take drugs.	59.8	59.0	48.1	36.7	36.3	22.9	20.4	45.1	338.90	<0.0001
3. People who take drugs are mentally sick.	44.1	43.2	31.2	29.2	25.3	18.0	15.3	32.7	306.36	<0.0001
4. People who take drugs should be fired from their jobs.	41.5	37.6	28.3	26.5	24.1	15.2	8.4	29.4	274.08	<0.0001
5. Only fools get 'hooked' on drugs.	66.6	64.3	61.1	52.3	52.1	41.6	33.0	56.9	197.98	<0.0001
6. Once a person has become addicted to drugs, there is little that can be done for him.	57.8	46.1	38.2	29.6	21.7	14.2	8.6	36.0	525.91	<0.0001
7. You have a greater chance of taking drugs if you mix with 'bad' people.	73.7	72.3	71.8	76.5	56.9	49.7	43.0	65.9	264.45	<0.0001
8. Most heavy drug users don't have any real friends.	53.2	56.1	49.1	43.3	44.3	33.9	28.6	47.2	118.07	<0.0001
9. Drug addicts should not be allowed to bring up children.	64.2	67.5	59.6	54.2	51.2	46.0	42.1	57.8	181.60	<0.0001
10. The use of marijuana ('pot', 'grass') leads to mental illness.	51.7	55.5	47.6	41.2	35.4	24.6	18.0	43.5	323.30	<0.0001
11. Many drugs are enjoyable to take.	10.8	10.8	8.1	15.6	16.2	19.1	24.2	13.3	185.28	<0.0001
12. Pep pills are great for kicks.	9.7	9.2	6.5	7.8	8.2	7.5	8.2	8.3	71.28	<0.0001
13. Pep pills can be a real help in getting you over a crisis.	16.1	16.9	12.5	21.5	15.3	16.1	18.6	16.5	79.13	<0.0001
14. Some drugs help you understand yourself.	14.7	12.9	11.2	14.8	14.9	12.2	16.1	13.7	26.00	>0.01
15. Drugs are good because they make you self-confident.	4.4	6.4	5.1	5.2	7.7	6.5	6.8	5.8	58.23	= 0.0001
16. Drugs are all right if only taken once in a while.	31.0	16.7	16.7	17.1	18.2	16.9	20.0	19.8	127.67	<0.0001
17. Drugs are an aid to creative people.	13.8	15.9	10.1	11.4	10.4	11.5	13.4	12.4	91.5	<0.0001
18. I would be interested in smoking marijuana ('grass', 'pot') if I were sure I wouldn't get caught.	5.2	8.7	9.5	11.8	15.3	20.4	23.9	11.4	171.15	<0.0001
19. There is nothing wrong with taking a mushroom 'trip' (drug experience).	6.3	7.7	8.7	12.5	12.9	15.5	17.9	10.4	111.28	<0.0001
20. You need to try a drug to know what it is all about.	20.5	19.3	23.1	32.5	31.5	35.6	35.7	26.4	120.94	<0.0001
21. Drugs are all right as long as you don't allow them to get a hold on you.	29.6	22.4	20.7	21.8	24.1	21.6	22.6	23.6	113.62	<0.0001
22. You feel left out of things if you don't take drugs.	5.9	4.0	6.0	6.9	5.9	3.3	4.8	5.5	88.30	<0.0001
23. There is nothing wrong with trying a drug once.	22.8	17.5	20.0	28.6	28.8	33.7	32.3	24.5	115.74	<0.0001

TABLE 160

Percentage Agreeing with Drug Attitude Items in Each Grade (cont.)

Item	Grade Percentage							Weighted Total Percentage	Significance of Grade Differences	
	6	7	8	9	10	11	12		χ^2 (df=24)	p
24. It would be fine to take drugs if it were not for the police.	5.7	8.2	4.6	9.8	10.4	10.8	12.6	8.1	94.24	<0.0001
25. Any new experiences from drugs are not worth the risk.	59.3	69.3	65.4	67.9	69.4	68.7	65.2	66.3	103.74	<0.0001
26. It would worry me if my friends were taking drugs.	80.0	79.0	80.4	74.2	73.3	77.0	72.6	77.3	119.44	<0.0001
27. You should use drugs only when your doctor says to use them.	86.0	85.3	85.7	77.6	79.7	74.7	71.2	81.8	143.23	<0.0001
28. People who refuse to take drugs are real phonies.	4.8	6.8	2.5	4.0	3.0	1.7	1.2	3.9	107.67	<0.0001
29. You cannot trust people who do not take drugs.	15.6	12.3	12.0	9.0	9.7	5.1	4.0	11.0	79.91	<0.0001
30. There is a lot to admire in people who take drugs.	13.6	8.9	8.7	8.8	7.5	3.6	4.0	8.9	94.32	<0.0001
31. People who don't take drugs are too scared to take them.	27.1	20.0	17.6	14.6	15.1	10.1	7.9	17.8	198.61	<0.0001
32. People have a right to experiment with drugs if they wish to do so.	35.9	32.9	39.2	49.1	52.6	53.7	59.3	43.3	127.23	<0.0001
33. People who take drugs are not afraid to break away from the ideas of their parents.	29.5	43.5	40.6	45.0	43.2	39.4	38.2	40.0	195.62	<0.0001
34. There should be no law against taking drugs.	14.8	15.1	14.0	13.5	18.5	22.1	15.5	15.6	99.60	<0.0001

TABLE 161

Analysis of Variance of the Antipathy to Drug Users Factor

Source	df	MS	F	p
Grade	6	9872.1	121.39	0.001
Sex	1	2638.0	32.44	0.001
Grade x sex	6	52.1	0.64	> 0.01
Residual	3368	81.3		

TABLE 162

Grade and Sex Means on the Antipathy to Drug Users Factor

Sex	Grade Mean							Weighted Mean
	6	7	8	9	10	11	12	
Males	5.7	4.6	2.1	−0.4	−1.8	−6.4	−7.7	1.0
Females	4.7	3.0	0.2	−2.1	−4.8	−8.0	−9.8	−0.7
Total	5.2	3.9	1.0	−1.4	−2.9	−7.2	−8.7	0.2

TABLE 163

Analysis of Variance of the Beneficial Effects of Drug Taking Factor

Source	df	MS	F	p
Grade	6	200.9	2.04	>0.01
Sex	1	1545.8	15.68	0.001
Grade x sex	6	123.4	1.25	>0.01
Residual	3368	98.6		

TABLE 164

Grade and Sex Means on the Beneficial Effects of Drug Taking Factor

Sex	Grade Mean							Weighted Mean
	6	7	8	9	10	11	12	
Males	0.8	−0.9	−0.8	−0.7	0.4	0.5	2.0	0.0
Females	−1.6	−2.2	−1.9	−0.3	−1.7	−0.8	−0.8	−1.4
Total	−0.3	−1.5	−1.4	−0.5	−0.4	−0.2	0.7	−1.7

TABLE 165

Analysis of Variance of the Approval of Experimental Drug Taking Factor

Source	df	MS	F	p
Grade	6	490.1	4.98	0.001
Sex	1	330.6	3.36	>0.01
Grade x sex	6	237.9	2.42	>0.01
Residual	3368	98.5		

TABLE 166

Grade and Sex Means on the Approval of Experimental Drug Taking Factor

Sex	Grade Mean							Weighted Mean
	6	7	8	9	10	11	12	
Males	2.8	−0.7	−0.3	−0.7	0.2	−0.9	−0.3	0.2
Females	1.2	−0.8	0.5	1.5	2.3	1.1	0.8	0.8
Total	2.0	−0.8	0.1	0.6	1.0	−0.5	0.2	0.5

TABLE 167

Analysis of Variance of the No Danger in Drug Taking Factor

Source	df	MS	F	p
Grade	6	1596.5	16.55	0.001
Sex	1	680.0	7.05	0.008
Grade x sex	6	108.4	1.12	>0.01
Residual	3368	96.4		

TABLE 168

Grade and Sex Means on the No Danger in Drug Taking Factor

Sex	Grade Mean							Weighted Mean
	6	7	8	9	10	11	12	
Males	−3.7	−1.5	−1.7	0.5	1.0	2.1	2.1	−0.7
Females	−3.0	−3.0	−2.7	−0.5	−1.2	0.9	2.0	−1.7
Total	−3.4	−2.2	−2.3	0.0	0.2	1.5	2.0	−1.2

TABLE 169

Analysis of Variance of the Disapproval of Non-Drug Users Factors

Source	df	MS	F	p
Grade	6	3049.3	32.56	0.001
Sex	1	816.2	8.72	0.004
Grade x sex	6	189.0	2.02	>0.01
Residual	3368	93.6		

TABLE 170

Grade and Sex Means on the Disapproval of Non-Drug Users Factor

Sex	Grade Mean							Weighted Mean
	6	7	8	9	10	11	12	
Males	1.6	−0.1	−1.0	−1.7	−2.5	−4.5	−5.5	−1.2
Females	2.6	−1.5	−1.5	−3.9	−4.8	−6.3	−5.6	−2.2
Total	2.1	−0.8	−1.3	−3.0	−3.4	−5.5	−5.6	−1.7

TABLE 171

Schools that Participated in the Study

Metropolitan Schools

Government

Acacia Ridge State School
Aspley State High School
Banyo State High School
Bremer State High School
Brisbane State High School
Clontarf Beach State High School
Clontarf Beach State School
Coorparoo State High School
Corinda State High School
Indooroopilly State High School
Ipswich State High School
Kedron State High School
Kenmore South State School
Macgregor State High School
Mitchelton State School
Mitchelton State High School
Moorooka State School
Nashville State High School
Newmarket State High School
Nundah State School
Oxley State High School
Pine Rivers District State High School
Richlands East State School
Richlands State High School
Runcorn State School
Salisbury State High School
Sandgate District State High
The Gap State High School
Wavell State High School
Wynnum North State High School
Yeronga State High School
Acacia Ridge State High School
Oxley State School
Sunnybank State School
Wynnum West State School
Amberley State School
Craigslea State School

Non-Government

Our Lady of Lourdes, Sunnybank
St Pius Convent, Salisbury
St Patrick's College, Shorncliffe
Mt St Micheal's College, Ashgrove
Moreton Bay College, Wynnum Central
Padua College, Kedron
St Peter's Lutheran School, Indooroopilly
St Edmunds' Christian Brothers College, Ipswich
St Laurence's College, South Brisbane
St Mary's Marist Brothers College, Ashgrove
Lourdes Hill College, Hawthorne
Ipswich Girls Grammar School, Ipswich
Mt Alvernia College, Kedron
St Ursula's College, Dutton Park
All Hallows Convent, Brisbane
Mt Frawley College, Scarborough

Schools in towns with a population in excess of 30,000

Government

Cairns State High School
Happy Valley State School
Heatley State High School
Heatley State School
Miami State High School
Mt Isa State High School
Rockhampton State High School
Southport State High School
Townview State School
Townsville Central State School
Trinity Bay State High School
Cairns North State School

Non-Government

Church of England Boys School, Toowoomba
St Augustine's Marist Brothers, Cairns
St Patrick's College, Townsville
The Range Convent High School, Rockhampton
The Southport School, Southport
Sacred Heart College, Downlands, Toowoomba
Toowoomba Boys Grammar School, Toowoomba

TABLE 171

Schools that Participated in the Study (cont.)

Schools in towns with a population under 30,000

Government

Beaudesert State High School
Chinchilla State High School
Bowen State School
Bundaberg State High School
Gladstone State High School
Gympie State High School
Lockyer District State High School
Mackay State High School
Mareeba State School
Maryborough State High School
Moura State High School
Nambour State School
Warwick State High School
Blackwater State School
Bowen State High School
Charters Towers State High School
Charters Towers Central State School
Collinsville State High School
Nambour State High School
Gayndah State High School
Ingham State High School
Mt Morgan State High School
Stanthorpe State High School
Texas State School
Tully State High School

Non-Government

St Mary's Convent, Warwick
Star of the Sea Convent, Gladstone
Sisters of Mercy Convent, Gordonvale
St Therasa's Christian Brothers College, Gympie
Marist Brothers Catholic High School, Gladstone
St Mary's Convent, Charters Towers
Boys Town, via Beaudesert
All Souls School, Charters Towers
Presbyterian Girls College, Warwick
Christian Brothers College, Bundaberg

Country Schools

Government

Clifton State High School
Malanda State High School
Mirani State High School
Pittsworth State High School
Aramac State School
Baralaba State School
Gracemere State School
Kenilworth State School
Mirriwinni State School
Moggill State School
Wallumbilla State School
Waterford State School
Bluff State School
Bollon State School
Bangeen State School
Gallangowan State School
Gargett State School
Geham State School
Georgetown State School
Goodwood State School
Grandchester State School
Woodstock State School
Goovigen State School
Woongarra State School
Wooroolin State School
Wyandra State School